

UKMi Executive meeting

10th-11th November 2011
Hallmark Hotel, Derby

Chair: Trevor Beswick

Secretary: Janice Watt

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

APPROVED MINUTES

11/58 Apologies for absence

Melinda Cuthbert, Claudine Hughes, Ben Rehman, Craig Rore

11/59 Minutes of previous meeting held on 15th September 2011

The following corrections were identified

Matters arising 10/89- Revise wording to :”TB has received an email from Nikki Heyler advising that the project to extend the content of the eMC is delayed as there are possible issues with new content in relation to interpretation of the ABPI code of conduct”.

11/56- Revise wording to “SB is to contact with MHRA representatives to discuss the specific issues”

Otherwise, the minutes of the meeting were agreed to be an accurate record.

11/60 Matters arising not on the agenda

11/56- SW advised that the Pharmaceutical Press has decided not to progress the possibility of adding the UKMI workbook to its portfolio but RPS may be interested in accrediting material for members. SW meeting with them next week to discuss this further.

11/51- Renal Drug Handbook- TB has written to Caroline Ashley about supporting the Renal Drug handbook publishers in distribution of information on errors and clarifying which version is the most up-to-date but has had no reply yet. PG reported that some trusts have reported that there have been some problems with subscribing to the handbook in recent months.

A list of errors within the UCL Guide has recently been circulated.

Action Items

	Person Responsible	Deadline
Follow up on Renal Drug Handbook issues with Caroline Ashley	TB	December 2011
Draft information for inclusion in UKMI website on risks associated with Renal Drug Handbook as well as UCL Guide	SW	December 2011
Contact Renal Drug Handbook publisher re future plans	PG	December 2011

IT

Matters arising

10/82 Medstream Update

Steve Mott is still keen to progress the project but there are some technical problems with data provided by GSTT and Steve is working on a number of other projects. DE will continue to keep the group updated on progress.

11/16 NHS Evidence – NeLM collaboration

See minute 11/67.

11/17 and 11/38- NHS Evidence Accreditation process manual consultation/ accreditation of UKMI products

UKMI working group is still to be set up. CP, FW and SW agreed to progress this. The three areas to be addressed are:

A better understanding of the accreditation process using experience of other groups (FW reported that the Welsh Medicines Partnership experience will be useful for this)

To identify for what products UKMI might seek accreditation

To test the process using Q and As as an example

Action Items:	Person responsible	Deadline
Set up working group to consider NHS Evidence accreditation	CP, SW, FW	March 2012

11/61 MiDatabank- update from steering group

TB reported a very positive meeting with CoACS. A full report of this meeting has been circulated. Key points covered were:

- There is a huge variation in IT capability and infrastructure across UKMI sites.
- The ability to influence information governance is also very variable.
- UKMI regional leads should continue to encourage progress to v3.

Next steps:

- CoACS advised that they do not anticipate developing any further Windows based versions and that the next development would be an Internet/ Intranet browser based application. CoACS advised that it would cost approx £100,000 to develop.
- The steering group will come back to the UKMI Exec with some costed ways forward for development of future versions
- CoACs have advised that they are now in a position to pilot sharing of enquiries. Potential for a regional or national community with a read only searchable archive with or without patient identifiable data is feasible. The Exec. agreed to support this project and to ask CoACS to develop this functionality further.

FW reported that the CGWG is considering standards for what information from previous enquiries should be included in the new enquiry. Another issue to be addressed is what information is included on clinical experts personal details in the answer and research fields.

Action Items:	Person responsible	Deadline
Circulate MiDatabank Steering Group ToR for group	TB	November 2011
Feedback to CoACs on pilot project for sharing enquiries	TB	November 2011
Feedback to Exec on standards for inclusion of information on previous enquiries	CGWG	February 2012

Clinical Governance		
11/62(a) Clinical Governance Working Group report- KPIs		
<p>The use of KPIs in practice was discussed. It was agreed that central collation for benchmarking and monitoring trends is very important. Data other than enquiries should also be collected. It was agreed that some KPIs could be linked with data collected in workload survey and collated centrally.</p> <p>A menu of more detailed KPIs has also been proposed by the CGWG. This was also considered helpful because local MI centres are frequently asked for KPIs by their Trusts. It was agreed that Medicines Management workload should be collated but that this could be identified under a single heading with the potential to break this down further at local level.</p> <p>The following format was agreed:</p> <ul style="list-style-type: none"> • Mandatory 3-5 indicators collected from all centres annually via workload survey • Highly recommended- 3-5 for local use • Optional- list of other possible KPIs for local use <p>It was agreed that Exec members should feedback to FW on the KPIs circulated including their categorization and any not required/ omitted. If suggesting new KPIs this should include a suggestion on how often it would be collected</p>		
Action Items	Person Responsible	Deadline
Rationalize list of KPIs and produce a list of mandatory, highly recommended, optional	CGWG	March 2012
Feedback to FW on the KPI list	All	November 2011
11/62(b) Clinical Governance Working Group report- External audit pairings		
<p>It was agreed to continue the audit cycle. The proposed audit pairings for 2012-14 were discussed and agreed.</p>		
Action Items	Person Responsible	Deadline
Put new audit pairings on the UKMI website	FW	November 2011
11/63 IRMIS Report		
<p>The issue of enquirers passing to patients information / written answers to enquiries supplied by MI was discussed. It was agreed that this is likely to occur more commonly in the future as patients become more involved in decisions about their care and is the information supplied to patients is the responsibility of the recipient of the information. TB's centre has a disclaimer at bottom of letters saying it is intended for recipient only.</p> <p>There was a question about whether errors due to workload pressure are becoming more common- FW agreed to look at the figures in more detail.</p> <p>There has been an IRMIS report about accuracy of a website providing information about Kosher products for Jewish people. It was agreed that this type of website is very difficult to appropriately QA and this would be very labour intensive. Users need to be aware of the limitations of this type of advice from websites.</p> <p>FW reported that an updated version of the IRMIS database is nearly ready and that a paper describing the IRMIS process will be discussed at the CGWG this month, with a view to seeking publication thereafter.</p>		

Action Items	Person Responsible	Deadline
Circulate a PDF of the IRMIS report	FW	November 2011
Patient Safety		
<p>Matters arising 11/42- DH never events- update on progress with UKMi involvement with high risk injectables DE reported that the list is now complete. However, the Medusa team is keen to expand the remit to a wide range of possible risk associated with the use of IV medicines. This is seen as a separate project. DE plans to finalise the list this week.</p> <p>11/22 RPS Patient Safety Group TB reported that UKMI has been invited to join an RPS Safety Group. RPS proposes to run a symposium on patient safety early in 2012. UKMI has been asked to contribute to this. BR has agreed to present.</p>		
Action Items:	Person Responsible	Deadline
Finalise list of high risk injectables and published on Medusa / NeLM	DE	November 2011
Liaison with other groups		
<p>Matters arising 10/89 Datapharm Update on progress on eMC development TB provided an update from Niki Heyler on the progress with the eMC. The project is progressing and a new eMC homepage will be launched next month. She reports slow progress on the additional information project and TB has offered support to highlight the importance of this information to healthcare professionals, if required.</p>		
11/64 UKMi-NHS Direct- considerations for 2012/13 SLA		
<p>No significant changes to the SLA for 2012/13 are anticipated. Peter was to meet with Anne Joshua and the NHSD contracts manager within the next couple of weeks, but after discussion it was agreed to delay the meeting so that Trevor can take part.</p> <p>A principal focus of the SLA is likely to be 'core review', as it is this year. This year's SLA included a target of 600 core reviews and we have probably delivered only around 50% which is of concern. NHSD leads only got access to the website in August which has hindered the review process. In addition, a number of RMICs are receiving an increasing number of requests for training which limits the time available for core review. Reviews with a poor outcome may necessitate one-to-one training to improve working practices, which again competes with time available. It is imperative that we have up to date statistics on work delivered/committed by NHSD leads so that we can determine what we are able to deliver for core review before the end of March 2012.</p> <p>Wynn Pevreal, NHSD lead for London RMIC, is leaving his post at the end of this year and will not be replaced. Anne Joshua may want to redeploy the money released to other areas of work, possibly outside the SLA.</p> <p>There is no certainty that the NHSD contract will extend beyond 2013 as the 111 service expands. We may need to negotiate a step down of activity within year 2012/13 if the opportunity to redeploy resources arises. We should also request that NHSD inform us of the likelihood and nature of any continuing SLA for 2013/14 by the 1st October 2012.</p> <p>It was agreed that we will share experience of providing MI services to 111. Simon has a bid in process with the Isle of Wight service.</p>		
Action Items	Person Responsible	Deadline
Meet with Anne Joshua and the NHSD contracts manager to discuss the	PG, TB	Dec 2011

SLA for 2012/13. Step down of activity over 2012/13 and timely heads-up on 2013/14 SLA to be included in the discussion.		
Ensure NHSD leads provide up to date statistics to Davina on days delivered/ committed.	All	Nov 2011
Share information on MI services agreed with 111	All	Ongoing
11/65 Unlicensed Medicines and Off-Label Medicines Project		
– We await formal conformation of the next steps following the announcements in September about the DH intention to commission expert assessments of the evidence on the use of off-label medicines. See also minute 11/67		
Action Items: Nil		
11/66 RPS Professional standards-		
- Monitored dosage systems		
- Hospital Pharmacy		
Monitored dosage systems (MDS)		
TB reported that UKMI has responded to the RPS professional standards on MDS. A number of general and specific points were made. No feedback / further drafts have been received as yet.		
The possibility of UKMI producing advice on Medicines suitable for MDS was discussed. Two options are:		
<ul style="list-style-type: none"> • Obtain Pinderfield Guide and work together to update by dividing the list between centres • Create a list of medicines that are definitely not suitable for an MDS. 		
Hospital Pharmacy Standards		
GC has circulated a first draft of these standards. The format is a list of overarching standards with the potential for some more specific standards relating to individual pharmacy services underneath. GC has submitted some initial comments on these standards. This is an early consultation within the steering group. Thereafter there will be another version for wider consultation. Standard 1 is particularly important to highlight UKMI's role.		
Action Items	Person responsible	Deadline
Try to obtain Pinderfield guide plus any data on file	GC	December 2011
Write to Catherine Duggan if Pinderfield Guide can be made available to UKMI to advise her that we intend to carry out the work	TB	January 2012
Circulate GC 's comments on hospital pharmacy standards	GC	November 2011
Feedback on GC's comments and in particular any good practice links that should be highlighted	All	January 2012
11/67 UKMI/ NHS Evidence Collaboration		

TB welcomed Dr Gillian Leng and Carrie Thompson from NICE to the meeting. There was a wide ranging discussion on a number of topics:

Unlicensed/ off label medicines project

Gillian providing some practical information about the forthcoming tendering process for the ULM project:

- Project will go out to tender end of November- early December 2011. The closing date is likely to be February 2012. The contract will commence May 2012.
- A maximum of 20 topics will be covered per year and NICE anticipates that each one would take approx 2 months.
- Potential bidders will have access to the monographs produced in the pilot project
- Tender will be for production of the monographs not about choosing the topics. The choice of topics will be co-ordinated by NICE separately. It is expected that UKMI will be asked to participate as one of the stakeholders advising on the topics.
- Once the project is up and running NICE will have a role in the final check: ensuring QA is being followed, face validity and QC check
- It is anticipated that the contract will be for 2-3 years in the first instance

NPC

Gillian gave an overview of the issues NICE is working through as it integrates the NPC into its structure. There was a helpful discussion on possible joint working and future collaboration on horizon scanning projects. It was agreed that a meeting should be arranged to discuss this further to involve CP, SW and PG. TB agreed to be the point of contact on other aspects of joint working with NICE.

NeLM/ NHS Evidence

Carrie Thompson described ongoing work with DE in relation to NeLM. NICE has confirmed that NeLM news will continue until an equivalent alternative product is available via NHS Evidence and NICE will continue to work with UKMI regarding the content for this newsletter. There are ongoing discussions about what aspects of the NeLM content will continue within NHS Evidence. NICE have confirmed that they will provide alternative hosting arrangements for UKMI products, and are aware there will need to be agreed access to gated content.

Action Items	Person Responsible	Deadline
Set up a meeting to discuss collaboration on horizon scanning	CP, SW, PG	December 2011

11/68 UKMI/ PIPA collaboration

PIPA representatives are keen to continue joint working with UKMI. It was agreed that it would be useful to invite someone from PIPA to a future UKMI Exec meeting. It was agreed that it would be useful to discuss the ongoing issues with advice from some industry medical information departments

Christine Randall is writing an article on the Yellow Card project for the PIPA publication- Pipeline

Action Items:	Person responsible	Deadline
Invite PIPA to UKMI Exec meeting in March 2012	FW	November 2011
Present the result of the Trent project on difficulties with industry MI services	PG	March 2012

11/69 DH- Clinical senates and networks

TB has responded to a DH paper on development of clinical networks with examples where UKMI is involved in these

Action Items: Nil

11/70 MHRA Review of UK medicines legislation- UKMI response		
It was agreed that UKMI should respond. It is likely that only we would only have views on some specific questions.		
Action Items	Person Responsible	Deadline
Email TB with any comments	All	Beg December 2011
Education and Training		
Matters arising		
11/24 UKMI Training Course		
FW reported that there are 26 participants registered for the January including 5 technicians. May need to look for a couple of extra tutors. Otherwise plans are well under way.		
11/46 Modernising medical careers- workstream 2		
SB reported on a meeting that she attended last week. SB advised that HEE is now delayed for 12 months. The exact timelines for this piece of work is not less clear. Now seems less likely that there will be a large written evidence gathering exercise although may consult on gaps in the information from the oral evidence gathering.		
8 high level themes identified:		
<ul style="list-style-type: none"> • Lack of a clear career pathway through to specialist level • Role and development of various members of pharmacy teams (skill mix) • Issues with separation of pharmacy careers at an early stage and problems with flexibility in this approach • Problems with availability of appropriately trained staff in some sectors • Core competency for pharmacists providing clinical care • Post reg. training funding and commissioning • Technician development • Research into career development 		
There is some post registration competency frameworks work with East Anglia. An online survey will also be conducted to identify frameworks. This will be advertised in the PJ and through networks. It was agreed that UKMI should contribute to this		
SB will continue to keep the Exec updated.		
Action Items	Person Responsible	Deadline
11/71 Practice Development Seminar 2011- Feedback		

Feedback on the PDS has been very positive. Delegates have asked for access to speakers' presentations. It was decided that in future years we will ask speakers to advise if they did not want their presentations on the website before the PDS. James will arrange to also get copies of presentations from parallel speakers at the PDS.

Problems were identified with sound quality. PG reported that the lecture theatre at Warwick is being refurbished and this should be improved.

There was good feedback on the new format of staggered viewing of sponsors' exhibitions. Some delegates asked if the authors could stand at their posters. It was agreed that the organizing committee would consider whether they could be asked to stand by their poster for 0.5-1 hour during the two days.

It was agreed that it would be helpful to have IT suites available for both days to allow more interactive IT sessions.

There was some support for a Friday-Saturday seminar but it was agreed that we might consider a Saturday if a joint seminar with UKCPA became viable (see minute 11/72).

Action Items	Person Responsible	Deadline
Change PDS paperwork for speakers to request access to presentations	KS	April 2012
Ask James Turton to get presentations from parallel sessions speakers	PG	September 2012

11/72 Practice Development Seminar 2012- programme

Possible topics for the 2012 PDS were discussed. It was agreed that there would be a organizing committee teleconference in December 2011

Action Items	Person Responsible	Deadline
Circulate PDS topic ideas	KS	November 2011
Advise KS of potential speakers for the proposed topics	All	Before teleconference
Circulate dates for teleconferences	KS	November 2011

11/73 UKMI/ RPS Collaboration- proposal for a shared conference

RPS has contacted all partner organizations to discuss a joint conference. BR will attend a meeting to discuss this further later in the month.

UKCPA have invited TB to attend the forthcoming weekend conference. There is to consider whether there may be scope to arrange a joint event between UKCPA and UKMI or other partner organisations.

Action Items	Person Responsible	Deadline
Contact Chris Green (UKCPA) to discuss the potential for a joint seminar	TB	December 2011

11/74 MiCal- proposal for changes for 2012

<p>BR as produced a paper on the proposed development of MiCal. Discussion with CoACS on this development is ongoing. TB and BR are meeting with Keith and Steve to discuss this.</p> <p>Synergy with the workbook and the potential for an electronic format for the workbook was discussed. BR and SW already liaise on content to minimise overlap. A meeting with London and SE MI pharmacists to discuss how the products are used in planned. The outcome of these discussions will be fed back to the Exec.</p>		
Action Items	Person Responsible	Deadline
Consider if a review of structure/ function of workbook is required in light of MiCal changes	SW/BR	June 2012
Research and development		
<p>Matters arising 11/28 Submitting yellow cards via MiDatabank Christine Randall has submitted an update on the Yellow Card project. Professor Woods agreed to send out a letter from MHRA to Chief Executives of Trusts highlighting the potential advantages of MiDatabank in encouraging Yellow Card submission. A priority for UKMI is to encourage installation of MiDatabank v3 with local centres.</p>		
Action Items:	Person responsible	Deadline
Contact MHRA re letter promoting MiDatabank	Christine Randall	
Discuss with Christine the content of the letter	TB	
11/75 R&D WG- consideration of different ways of working		
<p>SW has received some feedback on the different ways of working from members of the RDWG. SB and SW will meet to discuss this further. The importance of embedding R&D into the work programme of the other working groups was reinforced with the R&D WG providing advice/ leadership if necessary.</p>		
Action Items	Person Responsible	Deadline
Review R&D WG ways of working	SW, SB	March 2012
UKMi Executive Issues		
<p>Matters arising 11/56 UKMi Performance management 11/12 TB has updated the performance framework and will write out to regional centres for an update before the end of 2011.</p>		
Action Items	Person responsible	Deadline
Submit performance management data on request	All	December 2011
11/76 Specialist Pharmacy Services in England- Update		

TB has received some positive feedback on the information on MI Services supplied to David Webb in September. There seems to be continued support for specialist pharmacy services commissioned at national level. It is unlikely that this will move forward before 2013 and that existing funding arrangements should be maintained if possible in 2012/13.

It was agreed that the previous briefing paper on UK Medicines Information should be updated.

The following changes were suggested:

- Reference to medicines optimization
- Update on number of NeLM subscribers
- Remove reference to NPSA and refer to national safety initiatives instead
- Update number of FAQs available
- Reference to MI outcomes study in the introduction
- Governance and infrastructure section to be renamed to highlight role of the network in efficient working
- Highlight partnership with NICE
- Description of structure and funding
- Contact details for further info.

New developments in UKMI should be highlighted

- Yellow Card submissions
- NDO newsletter
- Loading dose projects

Action Items	Person responsible	Deadline
Update briefing paper	BR, TB	December 2011
Comments to TB	All	November 2011

11/77 MI service delivery to the private sector

SW has developed a template to gather information about the possible services that might be delivered by UKMI to the private sector. It was suggested that this might be used for future discussions with other private sector healthcare providers.

SW supplied some background to the arrangements at Nuffield hospitals:

- No MI service.
- Do not provide staff with electronic access to medicines information resources e.g. NeLM, Medicines Complete etc.
- MI enquiries may be generally level 1 or level 2 with more complex enquiries on policy, medicines management from the lead pharmacist.
- Anticipated that all enquiries would come through pharmacy.
- Out of hours' service not required.
- Information from horizon scanning products may be useful to the lead pharmacist for alerting insurance companies on new medicines on the horizon.

It was agreed that it would be appropriate to consider this type of funding arrangement for private hospitals in general. It was agreed that the options and funding should be considered further with more detail on the potential workload and costs, so that there is clearer picture of income, actual costs and profit. There was a general mention of differences in services costed marginally and fully. It was agreed that a single centre model would not be desirable as there would be value in providing advice more tailored to local healthcare policy depending on the location. This would be a particular issue in Scotland. It would be important to establish if the Nuffield has any existing SLA with hospital pharmacy services in the UK. It was suggested that we offer a number of options for service delivery including one option of 4 geographical sectors in England and Wales and Scotland.

Action Items:	Person responsible	Deadline
Feedback on the outcome of the forthcoming teleconference with lead pharmacist	SW	November 2011

Develop options for service delivery depending on outcome of teleconference	SE	If required
11/78 Interregional support for local major incidents		
Following the previous flu pandemic work UMI Exec developed a “buddying” arrangement to allow regional centres to support each other in the event of staffing issues etc. It was agreed that this would also be appropriate for use in other major incidents.		
Action Items	Person Responsible	Deadline
Change headings/ remit for the “buddying” list	KS	March 2012
11/79 Response to drug shortages		
TB reported that UKMI may be asked to contribute to some work co-ordinating infrastructure and advice on drug shortages. DE advised that if this work goes ahead we would need to be considerate of deadlines and thresholds for initiating the work.		
It was agreed that this would be a positive step.		
Action Items	Person Responsible	Deadline
Feedback to the Exec on any progress with this item	TB	March 2012
11/80 Vitamin D shortages		
BR in conjunction with clinicians and representatives of the Royal College of Paediatrics has written to the MHRA describing the problems with supply of vitamin D and advising of 4 products that if available would resolve this issue.		
Action Items	Person Responsible	Deadline
Circulate letter	BR	December 2012
11/81 UKMI Exec- Dates for next year		
The following dates were agreed:		
Teleconferences:	Meetings:	
Tuesday 17 th January 2012	Monday 5 th - Tuesday 6 th March 2012 (venue tbc)	
Friday 21 st May 2012	Friday 22 nd June 2012 (one day only)	
Tuesday 19 th September 2012	Monday 12 th - Tuesday 13 th November 2012	
Action Items	Person Responsible	Deadline
Investigate venue(s) for 2012 meetings	PG	January 2012
11/82 Communications/ AOB		
<p>TB TB reported that some guidance has been drafted about mixing injectables medicines. This follows a change to the legislation on mixing parenteral medicines. The guidance includes a statement that UKMI centres can provide advice about resources that may be used for advice on compatibility. There is the potential to create a Q&A on this using some existing material and also to link the Wessex e-learning package.</p> <p>DE NICE have written to all schools of pharmacy in England and Wales about the NHS Evidence champions scheme. This will involve undergraduate being selected as champions; they will be trained on NHS Evidence and then will promote this within schools of pharmacy. This may also involve some undergraduate teaching and there may be potential for joint working on this with UKMI.</p> <p>PG MIMS publisher is requesting that UKMI meet with them to discuss areas for collaboration. PG will discuss this with them further and feedback</p> <p>Elsevier also wants to meet UKMI representatives to discuss collaboration. PG will feedback on this.</p>		

PG has received requests for a national subscription for Lexicomp. There has been a change in personnel leading on UK subscriptions. PG will investigate whether a UK subscription may be possible.

Trent MI Centre's team has noted some errors and areas missing from Hale. They are going to carry out an evaluation with and Lactimed. It was agreed that a note should be added to the UKMI website identifying the risk with using Hale as a single source

DE
The Poison Information service at Guys Hospital is now officially closed but will continue to provide pharmaceutical industry, veterinary and clinical trial code breaking services as commercial services. It is currently unclear where staff that provided advice on Chinese Herbal Medicines have been deployed.

DTB restructuring and reviewing costs including review of peer review. Have asked whether UKMI might be interested in writing 1st draft reviews based on material supplied by DTB. It was agreed that this was a positive step. DE to feedback on progress with this.

KS
Martindale monographs on Medicines Complete have started to include a number of review dates within their monographs. It is not clear what role these additional dates have. KS will investigate with Julie McGlashan

CP
CP highlighted that Medline abstracts are now presented within Embase. CP will explore this further.

SB
UKCPA is promoting Pharmapedia. The content of this is relatively limited at present. It was agreed that Exec members would try to become more familiar with the content.

Action Items	Person responsible	Deadline
Establish whether an up-to-date list of compatible medicines exists within South Central	TB	March 2012
Identify any other resources on compatibility and pass to SW	All	March 2012
Highlight issues with Hale on UKMI website	PG	Mach 2012
Contact Julie McGlashan re changes to the Martindale review dates	KS	November 2011
Date of next meeting		
Teleconference:	Meeting	
Tuesday 17 th January 2012	Monday 5 th - Tuesday 6 th March 2012	
Other dates see minute 11/81		