

Devon, Plymouth and Torbay

Notes of the Northern and Eastern Formulary Groups 7th March 2013, Room C Tiverton & District Hospital, Kennedy Way, Tiverton

Chair Danna (CD) Chair		
Chris Roome (CR) Chair	Head of Clinical Effectiveness (Designate)	NHS Devon
Gareth Franklin (GF)	Clinical Effectiveness Pharmacist	NHS Devon
Hugh Savill (HS)	GP	NHS Devon
lain Carr (IC)	Medicines Optimisation Pharmacist	NHS Devon
Sam Smith (SS)	Locality Medicines Optimisation Pharmacist	NHS Devon
Tracey Foss (TF)	Director of Pharmacy	RD&E
TawfiqueDaneshmead (TD)	Consultant Gastroenterologist	RD&E
Ann Brown (AB)	GP, Wallingbrook Medical Centre	NHS Devon
Bernie Wathen (BW)	Formulary Pharmacist	NDDH
Stuart Kyle (SK)	Consultant Rheumatologist	NDDH
Andrew Harrison (AH)	GP, Exeter	NHS Devon
Darunee Whiting (DW)	GP, Northam Surgery	NHS Devon
Carol Albury (CA)	Locality Medicines Optimisation Pharmacist	NHS Devon
Simon Kay (SK)	GP, Haldon House Surgery	NHS Devon
Matt King (MK)	GP, Coleridge Medical Centre	NHS Devon
Stephen Myers (SM)	GP, Boutport Medical Centre	NHS Devon
Carol Webb(CW)	Joint Formularies Technician	NHS Plymouth
Tony Downs (TD)	Consultant Dermatologist	RD&E
Karen Davies (KD)	Consultant Dermatologist	NDDH
	Gareth Franklin (GF) Hugh Savill (HS) Iain Carr (IC) Sam Smith (SS) Tracey Foss (TF) TawfiqueDaneshmead (TD) Ann Brown (AB) Bernie Wathen (BW) Stuart Kyle (SK) Andrew Harrison (AH) Darunee Whiting (DW) Carol Albury (CA) Simon Kay (SK) Matt King (MK) Stephen Myers (SM) Carol Webb(CW) Tony Downs (TD)	Gareth Franklin (GF) Hugh Savill (HS) GP Jain Carr (IC) Sam Smith (SS) Tracey Foss (TF) TawfiqueDaneshmead (TD) Ann Brown (AB) Bernie Wathen (BW) Stuart Kyle (SK) Consultant Rheumatologist Andrew Harrison (AH) Darunee Whiting (DW) Carol Albury (CA) Simon Kay (SK) Medicines Optimisation Pharmacist Consultant Gastroenterologist Consultant Gastroenterologist Consultant Rheumatologist Consultant Rheumatologist Consultant Rheumatologist Consultant Rheumatologist Consultant Rheumatologist Corol Albury (CA) Corol Albury (CA) Corol Albury (CA) Corol Aldon House Surgery Matt King (MK) Cop, Coleridge Medical Centre Carol Webb(CW) Consultant Dermatologist Consultant Dermatologist

1.	CR welcomed everyone to the meeting and briefly outlined the purpose	
2.	Revised actinic keratosis (AK) guidance GF outlined Appendix 1 Topical treatment of actinic keratosis. There was some discussion of the different preparations and their suitability. It was decided not to add Imiquimod into the formularies for AK. Action: To add to the formularies Ingenolmebutate gel (Picato®) and Fluoroucil/salicylic acid solution (Actikerall®)	GF
3.	Psoriasis guidance review IC very briefly outlined the products currently. The NICE Guideline algorithms were discussed; TD/KD expressed issues with these and what is needed is simple guidance for patients to ensure correct treatment. There is no need for new products to be added, no need to link to the NICE guideline	IC / GF
4.	Comparison of dermatology guidance across Devon There was general discussion of the differences and the historical reasons. There was discussion on the problem of adherence to the formularies and content. Action: To discuss outside of the meeting the products needed in the formularies	CW / GF
5.	Future formulary working across Devon CR outlined the new commissioning landscape, NEW Devon CCG and South Devon CCG. There needs to be a collaborative approach for commissioning decisions, one committee to reduce the risk of 'postcode' prescribing. The proposed committee is the Clinical Policy Committee (CPC), the membership made up from the current four formulary areas both primary and secondary care but a small membership. There will be a tension between a central decision making process and keeping local ownership of the formularies. The individual DTCs will be responsible for the purely hospital only drugs	



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	which are in tariff. Primary care drugs and those drugs which are outside tariff will be the responsibility of the CPC, with the formularies defining how the drugs are used in practice.	
	There was discussion around the membership of the formulary group, local ownership, terms of reference, funding of locum fees and frequency of meetings. It was agreed that Tiverton is a suitable location for future meetings and Thursdays are a suitable day. Action: To contact all current members of the two formulary committees regarding their participation in the combined formulary	cw
6.	Published NICE Technology Appraisals Noted and agreed to add	
7.	MHRA Drug Safety Update Noted, nothing to add	
8.	Current formulary differences (GI Chapter) GF outlined the differences	
9.	Classification of information in the formulary (BNF vs condition) There was much discussion regarding this, it was felt that there needs to be flexibility between BNF/condition based. The current BNF website/App is moving to a combination approach. There was discussion around the different platforms used for the websites.	
10.	Date of next meeting: Thursday 25 th April 2013 Tiverton and District Hospital	