

SAFE USE OF MEDICINES GROUP

Meeting

Monday 20th September 2004

Time: 9.30am to 14.30pm

Attendees

Dwayne Crombie (Waitemata) – Chair
 Beth Loe (Project Manager)
 David Kibblewhite (Waikato)
 Mary Seddon (CMDHB)
 Allan Pelkowitz (Auckland)
 Marilyn Crawley (Waitemata)
 Elizabeth Plant (Taranaki)
 Emil Schmitt (Otago)
 Jane Vella-Brincat (Canterbury)
 Nirasha Parsotam (Auckland)

Invited

Adam McRae (PHARMAC)
 Peter Moodie (PHARMAC)

Minutes

Item	Topic/agenda	Notes/comments	Action Required
1.	Apologies	Gershu Paul, Tim Maling, Gillian Bohm, Avril Lee, Peter Black	
2.	Minutes of meeting 26 th July 2004	<ul style="list-style-type: none"> Agreed 	
3.	Format of the group	<ul style="list-style-type: none"> Advertisement for consumer representative placed in daily papers last week and 5 applicants to date, closing date 22/9/04 Advertisement for GP representative in Doctor Weekly 22.9.04 Letter sent to college of GP's, need to send letter to IPAC 	<ul style="list-style-type: none"> Letter to go to IPAC (Dwayne)
5.	Strategy document	<ul style="list-style-type: none"> It will be a huge task but our strength is that we are multidisciplinary Need to set some key objectives and prioritise them with a time line for what we intend to achieve over the next 12 months If we have a policy then it will influence long term commitment Could we link recommendations to accreditation process to ensure they are acted on Link to minister probably through EpiQual, need to establish links with them in the future 	<ul style="list-style-type: none"> See attached: comments on the draft Updated drafts to Beth by 18.10.04 David: strategy and policy Mary: High risk medicines & situations Beth: Audit, research etc Marilyn: infrastructure Peter M & Allan: write primary care statement

3.	Budget	<ul style="list-style-type: none"> Expenses: project time, consumer & GP expenses and education and information campaigns More project time necessary Possible revenue sources; PHARMAC, DHBNZ, MOH, ACC 	<ul style="list-style-type: none"> Draft budget (Dwayne)
6.	High Risk Medicines		
6.i	Potassium	<ul style="list-style-type: none"> PHARMAC consultation still planned for October Incident reports requested from quality managers 	<ul style="list-style-type: none"> Letter to go out with PHARMAC consultation (Beth)
6.ii	Warfarin	<ul style="list-style-type: none"> Some alterations to alert agreed by group Further consultation needed; haematologists at WDHB & CMDHB and GP liaison at WDHB Primary care consultation process needs to be agreed If no major changes then put in final form and distribute 	<ul style="list-style-type: none"> Consultation with others (Beth) Convert to final version (Adam/ Karolina)
6.iii	Heparin	<ul style="list-style-type: none"> Need to consider Clexane as well, problems with retroperitoneal bleeds following use after wrong diagnosis Need to consult on pre-mixed heparin bags now 	<ul style="list-style-type: none"> Consult on pre-mixed heparin bags (PHARMAC)
6.iv	Diltiazem	<ul style="list-style-type: none"> Problem with Medtech has been corrected but will not have been corrected in patients already on diltiazem or if GP has diltiazem in their personal prescribing list There are packaging issues Could reduce risk by only having 30mg immediate release strength on wards, add to alert Reducing the number of funded formulations would help reduce risk 	<ul style="list-style-type: none"> Letter to Medsafe re packaging issues (Beth) Alert (ADHB/Beth) Letter to PHARMAC (Beth)
6.v	Insulin	<ul style="list-style-type: none"> Questionnaires for community pharmacists(CPs) and GP's ready but feedback requested from sample GP's and CP's before sending out Widen consultation to include rural areas Send with covering letter to all DHB's 	<ul style="list-style-type: none"> Finalise questionnaire (Beth) Send out to all DHB's (Allan) Put on website (Beth)
6.vi	Morphine	<ul style="list-style-type: none"> Problem overseas seems to be confusion between 20mg/ml and 1mg/ml resulting in overdoses More research needed to identify problems Problems with packaging and labelling particularly with m-Eslon (recently funded brand) 16 incidents in just 2 of DHB's present involving m-Eslon, one a sentinel event ADHB have prepared bulletin that they are willing to share Do PHARMAC have a safety impact report when a change in funding is 	<ul style="list-style-type: none"> Research into issues (Jane) Circulate m-Eslon bulletin (Beth) Look at introducing safety impact reports (PHARMAC)

		<p>proposed, currently just look at CARM reports</p> <ul style="list-style-type: none"> • More publicity is needed when changes happen 	
9.	Teleconference with Richard Townley, Pharmacy sector Action Group, Manager of NZ College of Pharmacists	<ul style="list-style-type: none"> • Informed of the groups vision document and the 3 objectives that resulted from a multi-disciplinary meeting • Identify problems around reducing harm from medicines use in DHB's and presented them to DHB NZ by June 2005 • Identified main administration issues and proposed solutions by June 2005 • Establish an ideas clearing house for ideas/objectives from practice nurses, GP's and CP's to be circulated around NZ by Sept 2005 	<ul style="list-style-type: none"> • Liaise with this group (Elizabeth) • Send them details of our group (Beth)
6.vii	Cytotoxics, vincristine, methotrexate	<ul style="list-style-type: none"> • Oncology Special Interest Group from NZHPA are looking at intrathecal injections and might duplicate any work we do • Need a bulletin to highlight the dangers around oral methotrexate 	<ul style="list-style-type: none"> • Liaise with SIG group (Nirasha) • Draft bulletin re oral methotrexate (Nirasha)
6.viii	Intravenous Infusions	<ul style="list-style-type: none"> • Defer until strategy document written 	
6.ix	Good prescribing practice	<ul style="list-style-type: none"> • CMDHB have just issued a card to all medical staff • Need a national set of acceptable abbreviations 	<ul style="list-style-type: none"> • National abbreviations (Elizabeth, Marilyn)
7.	Information Technology	<ul style="list-style-type: none"> • Hatrix (electronic prescribing), project continuing in Otago: currently not linked to pharmacy, system slow, problems with number of workstations available 	<ul style="list-style-type: none"> • Follow developments nationally
8.	Primary/secondary interface	<ul style="list-style-type: none"> • Publish document on website 	
	Communication about the group	<ul style="list-style-type: none"> • Need to increase awareness in primary care • Website all the background work done, need to agree final structure and then load documents on • Elizabeth has completed her work force study • QUMap needed • Need to present the groups work at conferences • Articles in journals to reach all health care professionals 	<ul style="list-style-type: none"> • Identify conferences and possible speakers (All) • Website (Beth) • Investigate QUMap (Beth) • Present work force study to group at next meeting (Elizabeth)
11.	Dates for future meetings	<ul style="list-style-type: none"> • Wednesday 17th November Wellington 	