

SAFE & QUALITY USE OF MEDICINES GROUP

Videoconference

Thursday 4th June 2009 Time: 13.00 to 17.00

Attendees

Wellington

Chai Chuah (Chair)
Peter Moodie (PHARMAC)
Gillian Bohm (MOH)
Tim Maling (C&CDHB)

Dunedin

Roy Morris (Otago)
Adam McRae (PHARMAC)

Auckland

Beth Loe (National Coordinator)
Marilyn Crawley (Waitemata)
Frances McClure (GP)
Peter Black (ADHB)

Invited

Sarah Reader (Medsafe)
Michael Tatley (NZPhVC)

Minutes

Item	Agenda	Notes/comments	Action Required
1.	Apologies	Avril Lee, Nigel Millar, Peter Black, Gigi Lim, Mary Seddon, Dylan Tapp (ACC), Jane Brown (ACC)	
2.	Minutes of previous meeting	<ul style="list-style-type: none"> These were accepted 	
3.	Matters arising	<p><u>i. PreMec proposal</u></p> <ul style="list-style-type: none"> Still awaiting reply <p><u>ii. Potassium pre-mixes</u></p> <ul style="list-style-type: none"> Letter sent to Baxters asking them to register further premixed bags Audit report not completed yet <p><u>iii. Resus medicines presented in syringes</u></p> <ul style="list-style-type: none"> Agenda next meeting <p><u>iv. Use of cytotoxic injections in the community</u></p> <ul style="list-style-type: none"> Rheumatology Association President unable to attend today or in August and suggested contacting him by telephone <p><u>v. Annual report</u></p> <ul style="list-style-type: none"> Letter notifying that the report is available on the website to be sent next week 	<p><u>i. PreMec proposal</u></p> <ul style="list-style-type: none"> Contact chair of PreMec (Beth) <p><u>ii. Potassium pre-mixes</u></p> <ul style="list-style-type: none"> Complete audit report (Beth) Follow up with Centre for the Study of Diabetes (Beth) <p><u>iv. Resus medicines in syringes</u></p> <ul style="list-style-type: none"> Send list to PHARMAC (Marilyn) <p><u>v. Use of cytotoxic injections in the community</u></p> <ul style="list-style-type: none"> Look at steps in the process (Gigi) Phone President of the Rheumatology Association to discuss (Beth) <p><u>v. Annual report</u></p> <ul style="list-style-type: none"> Send letter (Beth)
4.	Group membership		<ul style="list-style-type: none">
4.i	New members	<ul style="list-style-type: none"> Following telephone interviews Chai has confirmed appointment of Beryl Wilkinson as the consumer representative, Beryl will join us at the next meeting The last two interviews (7 applicants being interviewed) for a health professional member that 	<ul style="list-style-type: none"> Complete process for appointment of health professional member (Beth)

		<p>was advertised in December last year are scheduled for tomorrow</p> <ul style="list-style-type: none"> • Q&R Managers group invited participant – Anne Kemp is seeking approval from her CEO and the Q&R Group 	
4.ii	Members seeking reappointment	<ul style="list-style-type: none"> • 4 members seeking re-election; Mary, Tim, Avril and Marilyn • Chai to confirm decision shortly 	<ul style="list-style-type: none"> • To be confirmed (Chai)
5.	Look-alike sound-alike guidelines proposed by Medsafe	<ul style="list-style-type: none"> • Sarah Reader (Medsafe) described the current situation; labelling: rules in Medicines Regulations and names: Medsafe guidelines • Proposed adapting the international guidelines that are available regarding look-alike, sound-alike names and packaging • The sector, i.e. industry and health professionals, will be consulted • It was agreed that Medsafe would write the first draft and then SQM could feedback 	<ul style="list-style-type: none"> • Draft guidelines (Medsafe)
6.	Linking patient allergy status to NHI	<ul style="list-style-type: none"> • Link from ACC to CARM via Medsafe for treatment injury claims (i.e.allergic reactions or serious adverse drug reactions) that have been accepted by ACC has now been established • CARM links any reports to the NHI within 24 – 48 hours of receipt • Delay in the link being available in the provider arm must be either loading the data at the MOH or uploading the updated data in the provider arm • Letter has been sent to DGG IT at MOH regarding the delay • NHI system currently up for review • Review plans that the medical warning module will cease to exist in 2010, this was discussed at a recent meeting and had not been anticipated • CARM have serious concerns regarding this • The SMMP IT clusters need to be informed about this 	<ul style="list-style-type: none"> • Write to Alan Hesketh (DGG for IT) about the need for clinical input to the national project (Beth) • Invite representatives of NHI review panel to attend the August meeting (Beth) • Link with Chai re SMMP IT clusters (Beth)
7.	NZPhVC update	<ul style="list-style-type: none"> • MOH has indicated that it will fund a scoping exercise for the medication error project and currently settling the contractual details • Looking to find a way to share the learning from error reports • NZPhVC working with secondary care incident reporting project team (Ashley Bloomfield) to prevent duplication 	<ul style="list-style-type: none"> •
8.	ACC Update	<ul style="list-style-type: none"> • Not available 	<ul style="list-style-type: none"> •
9.	QIC update	<ul style="list-style-type: none"> • Health Round Table – none of the 4 work streams are looking at medication in isolation • QICs last meeting agreed that the SMMP programmes were on track and making progress • Recommended to the Ministerial Group reviewing committees recommended that there was a need for a quality organisation 	<ul style="list-style-type: none"> •
10.	Safe Medication Management Programme update	<ul style="list-style-type: none"> • Discussion regarding the finalised Pathways and Barriers to Unit Dose Packaging (UDP) report • This now presented a more balanced view and many of SQMs concerns about the initial report had been addressed 	<ul style="list-style-type: none"> • Write to SMMP re primary care (Beth) • Invite Shayne Hunter from SMMP to attend the next meeting to talk to the report

		<ul style="list-style-type: none"> Concerns still existed because of the plan to single out high risk medicines for UDP as an initial step, this may not be sustainable as a strategy Additional point raised that the report only considered advantages and barriers in secondary care and did not consider primary care For community pharmacy, bar coding would provide a significant step forward in safety terms No further update available 	(Beth)
11.	Technical Advisory Group/ Clinical Leadership Group (CLG)	<ul style="list-style-type: none"> No progress 	<ul style="list-style-type: none"> Draft proposal and TOR (Beth)
12.	National Medicines Chart (NAIMS)	<ul style="list-style-type: none"> Latest version of national adult medication chart discussed Suggested it should include adult surgical and medical in title Proposed to develop two versions; one with a decimal point included, this would be a significantly different decimal point version to that previously sent for national consultation and one without Both versions to be discussed with pilot sites before choosing one version to pilot 	<ul style="list-style-type: none"> Finalise chart for pilot (Beth) Paediatric chart to be developed as soon as possible (Beth)
13.	High Risk Medicines	<ul style="list-style-type: none"> Agreed that a formal process map for alert development, consultation and release should be developed 	Draft process for alert development and agenda next meeting (Beth)
13.i	Unfractionated heparin	<ul style="list-style-type: none"> Alert in development PHARMAC consultation regarding funding of enoxaparin in Schedule B&H of the Pharmaceutical Schedule Concerns re statement in consultation that there are no significant safety concerns with general practitioners prescribing LMWH MARC previously asked SQM to write an alert advising prescribers about the risks of prescribing usual doses of LMWH in renal impairment, this alert was only sent for action to secondary care bpac are developing educational material for general practitioners Alert needs to go to primary care prescribers, and other prescribers e.g. midwives if they have not received it previously 	<ul style="list-style-type: none"> Develop an unfractionated heparin alert (Beth) Draft response to PHARMAC consultation and circulate for comment (excluding Peter and Adam) (Beth) Send agreed response to PHARMAC (Beth)
13.ii	Intravenous infusion audit report	<ul style="list-style-type: none"> Agenda next meeting 	<ul style="list-style-type: none"> Complete audit report (Beth)
13.iii	IT cytotoxic injection	<ul style="list-style-type: none"> Discussed covering letter for joint evaluation in conjunction with UofA students Agreed that letter should be from SQM and evaluation forms should be returned to SQM and the forms then passed to the students to ensure anonymity and encourage completion 	<ul style="list-style-type: none"> Re-write covering letter (Beth)
13.iv	Colchicine	<ul style="list-style-type: none"> Alert finalised 	<ul style="list-style-type: none"> Alert to be sent out next week (Beth)
13.v	Oral methotrexate	<ul style="list-style-type: none"> Agenda next meeting 	<ul style="list-style-type: none"> Agenda next meeting (Beth)

14.	Renal drug dosing	<ul style="list-style-type: none"> • Need for national consultation discussed • Alert approved to go out for national consultation 	<ul style="list-style-type: none"> • Send alert out for national consultation (Beth)
15.	Paediatric alert related to HDC report	<ul style="list-style-type: none"> • Alert approved to circulate nationally for comment 	<ul style="list-style-type: none"> • Send alert out for national consultation (Beth)
16.	Etoposide/ etoposide phosphate	<ul style="list-style-type: none"> • Alert in development 	<ul style="list-style-type: none"> • Develop an alert (Marilyn)
17.	Patient Information leaflet for all settings on medication safety	<ul style="list-style-type: none"> • Discussed with ADHB and they are happy for their information leaflet to be published on the SQM website • Discuss PHARMAC work with Adam 	<ul style="list-style-type: none"> • Put ADHB leaflet on website (Beth) • Discuss PHARMAC work with Adam (Beth) • Work on PIL if not covered by PHARMAC (Gillian, Avril, Beth)
18.	Primary Care Issues	<ul style="list-style-type: none"> • None to be discussed 	
19.	International System for DI classification	<ul style="list-style-type: none"> • Agenda next meeting 	<ul style="list-style-type: none"> • Agenda next meeting (Beth)
20.	Allergy alert system and education	<ul style="list-style-type: none"> • Education around allergies – bpac input required 	<ul style="list-style-type: none"> • Agenda next meeting (Beth)
23.	Alerts of Toniq dispensing system	<ul style="list-style-type: none"> • Waiting for progress from Toniq 	
24.	BPAC articles	<ul style="list-style-type: none"> • Discuss with David Woods 	<ul style="list-style-type: none"> • Discuss with David Woods (Beth)
	International student at AUT doing postgraduate studies available for research	<ul style="list-style-type: none"> • Student has a pharmacy degree and is willing to undertake a research project 	<ul style="list-style-type: none"> • Suggestions for projects to Beth (All)
	Next meeting	<ul style="list-style-type: none"> • Agreed to alternate face to face/ videoconference meetings • Next meeting August 3rd in Auckland , venue to be advised 	