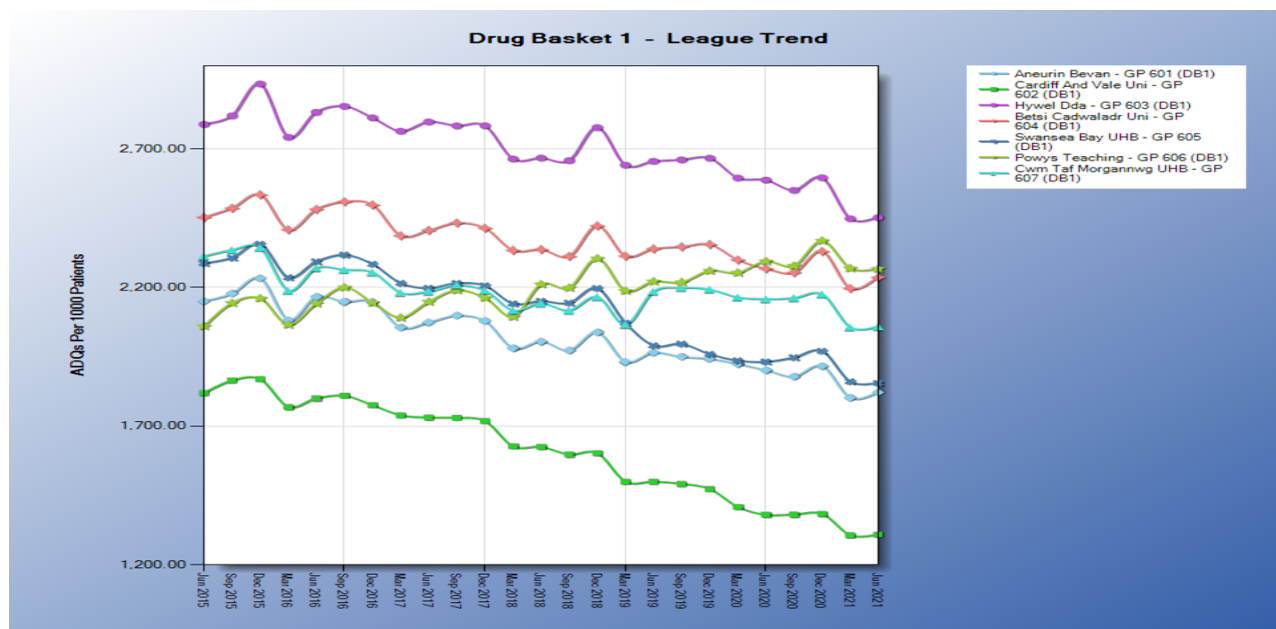


Enw'r Pwyllgor: Name of Sub-Committee:	Exception Report from Medicines Management Operational Group
Cadeirydd y Pwyllgor: Chair of Sub-Committee:	Dr Subhamay Ghosh, Associate Medical Director for Quality and Safety
Cyfnod Adrodd: Reporting Period:	February 2022
Materion Ansawdd, Diogelwch a Phrofiad: Quality, Safety & Experience Matters:	

Chronic Pain Work

The Medicines Management Operational Group (MMOG) received an update from the Chronic Pain Pharmacy Team which was established in September 2020. The team works closely with Chronic Pain Services (including Nurse Specialists and Clinical Psychologists) in supporting complex patients with their pain management. Aligned to the National Prescribing Indicators, the Health Board is working to reduce the Opioid burden within our region. Medication reviews of complex patients are undertaken and treatment plans put in place to reduce the level of Analgesia, supporting the patient and working with GPs in the community. Hywel Dda University Health Board has the highest level of Opioid burden across Wales and while there is a steady reduction in Opioid burden (more so since the focused team has been established) across the Health Board in the past years, there remains significant work to be progressed as can be seen in Graph 1 below.

Graph 1: ADQs per 1000 patients



In addition to the quantitative data, the Chronic Pain Multi-Disciplinary Team (MDT) is also collecting Quality of Life data on the Opioid withdrawal work which will be analysed in the future. A bilingual patient information leaflet has also been developed along with an App to support patients.

COVID-19

During the past year, there have been a number of advances in the treatment of COVID-19 to improve patient outcomes. The treatment option of a Neutralising Monoclonal Antibody (nMAB) was first established for in-patients who had a diagnosis of COVID-19, were symptomatic and showing signs of deterioration based on clinical trial outcomes. More recently in December 2020, interim guidance, based on clinical trial outcomes, was published through the Chief Medicines Officer, indicating that early use (within 5 days of onset of symptoms) in patients who are in the community should significantly reduce the risk of admissions. Health Boards were asked to rapidly establish pathways to support patients in the community accessing these drugs as well as the oral antiviral drug Molnupiravir.

Procedures and pathways have been implemented successfully for these patients who are within the very high risk cohort. Patients are identified through a number of ways: the National Antiviral Service (NAVAS) in addition to Local Consultant and GP referral, with over 40 patients receiving treatment. The nMAB is administered intravenously for approximately 30 minutes, followed by an observation period. This has presented challenges to the hospital sites in identifying a safe clinical area to receive a patient who is COVID-19 positive to access this treatment, however they have been very proactive in supporting the implementation of the pathways over a very short period of time.

Controlled Drug Safe Keeping of Buvidal in Non-Health Board Premises for Duration of Buvidal Administration Clinics.

The Local Intelligence Network (LIN), a sub-group of MMOG, was asked to consider the proposed process to ensure that the controlled drug (Buvidal) is appropriate for the safe transfer and safe keeping of the Controlled Drugs (CD) while undertaking clinics on a non-Health Board premises. This was considered at LIN and brought to the attention of MMOG for approval.

Buvidal is a long acting formulation of Buprenorphine; once a patient is stabilised on weekly injections this can be extended to monthly intervals. This has a very positive impact on the individual and provides greater opportunities to return to a more 'normal' lifestyle with work etc. as it removes the need for frequent daily trips to a local pharmacy. The roll out of Buvidal as part of the substance misuse pathway is supported at a national level.

In most areas the implementation has already taken place or is in progress, however in the Llanelli area of Hywel Dda, where there is a significant need, it has stalled due to the premises that are available for use being non-Health Board and therefore controlled drugs cannot be legally stored on the premises.

To enable the clinics to progress, a process has been developed, along with a Standard Operating Procedure (SOP) to support access to Buvidal.

The LIN reviewed the SOP and was content with the proposal. Some concerns were raised with regard to the safety of the staff members responsible for transferring the stock from the hospital to the clinic. Suggestions to mitigate these risks are as follows:

- Ensure container is 'non-descript' to avoid attracting attention

- Consider low level police support if necessary.

The service agreed to look into these options.

This procedure was approved by the MMOG for implementation within this setting.

Risgiau:

Risks (include Reference to Risk Register reference):

- The high risks remain around the Aseptic Unit Facilities. A meeting is being scheduled with Welsh Government to discuss the current submission for a new unit, as the Transforming Access to Medicines (TrAMS) has been formally signed off by the Minister early in 2021. There is potentially an alternative solution linked with provision of radiopharmaceuticals being provided through the new unit in Singleton Hospital. This will not have a negative impact on HDdUHB patients as they will continue to receive diagnostic in Worthybush General Hospital (WGH). It will potentially release some additional space within the existing unit to support a less ambitious but necessary upgrade of the unit, sufficient to maintain services until the South East Hub of the TrAMS project is functioning. This work is currently being scoped and whilst not yet confirmed, offers an alternative option.
- A review of the electronic prescribing and medicines administration (EPMA) risk is being undertaken to identify whether this should sit within Medicines Management or a wider part of the service.
- Replacement of the dispensing robots within Bronglais General Hospital (BGH) and WGH have been approved and the installation will commence early in 2022/23. This will reduce the risk of delays in provision of medicines for patients, omissions, selection errors and significant disruption to the day to day running of the hospital sites.

Gwella Ansawdd:

Quality Improvement:

Improvement to Proton Pump Inhibitor (PPI) Prescribing in Hospital Sites.

PPIs are a group of medicines that work on the cells that line the stomach, reducing the production of acid. They are used for a variety of reasons including acid reflux, treatment of stomach ulcers and they can be co-prescribed with long term non-steroidal anti-inflammatories to prevent ulcers.

However there is evidence that the long term prescribing of PPIs increases antibiotic resistance and Clostridium Difficile infections, therefore regular review is essential to determine that a PPI still remains an appropriate treatment option.

To encourage review of these medicines when prescribed with an antibiotic in hospital, a sticker has been designed to prompt review. Initially the sticker alone resulted in a 25% reduction of PPI prescribing, however following the Plan, Do, Study Act (PDSA) methodology, education sessions and feedback this has reduced to a 90% review rate. This initiative is now being implemented across all sites.

Thrombosis Guidance Developments

The re-establishment of the Thrombosis Group has supported the review and approval of a number of key prescribing guidelines to support safe patient care over the past few months including COVID-19 Venous Thromboembolism Risk Assessment and Slow Loading Warfarin

Guideline. The next steps with approved guidelines is to upload them onto the Micro Guide App to ensure easy access for clinicians across all sectors.

Antibiotic Guidelines

The use of the Micro Guide app to support rapid access to current Health Board prescribing guidelines has proved very positive in the first year of use. Additional guidelines will be added to further support clinicians in their decision making around prescribing. Charts 1 and 2 below show the number of downloads and the range of clinical staff that use this platform.

**Argymhelliad:
Recommendation:**

- For the Quality, Safety and Experience Committee to note the content of the Medicines Management Operational Group Exception Report and be assured by the mitigating actions in place.

**Dyddiad y Cyfarfod Pwyllgor Nesaf:
Date of Next Sub- Committee Meeting:**

22nd March 2022