

Minutes of Pharmacy Group

Tuesday 10 October 2023
2:00pm – 3:30pm
via Microsoft Teams

Present:

Jane Gill (JG), Clinical Lead, EMNODN, South Hub (Chair)
Neha Shah (NS), Advanced Specialist Clinical Pharmacist, Woman and Children, ULHT
Lamia Ahmed (LA), Advanced Pharmacist, Women’s & Children’s, UHDB
Lucy Stachow (LS), Advanced Specialist Neonatal Pharmacist, UHL

In Attendance:

Linsay Hill (LSH), Office Manager, EMNODN (Minutes)

	Subject	Attachment	Action
1.	Apologies for Absence Anneli Wynn-Davies (NGH), Julie Vanes (QHB), Sarah Pilling (NGH) Joanna Hurcombe (RDH)		
2.	Disclosures of Conflicts of Interest None		
3.	Minutes from the Previous Meeting The minutes from the previous meeting were accepted as an accurate record of proceedings.	A	
4.	Matters Arising None		
5.	GIRFT Report and Actions LS asked around standardising PN bags. Katie Hay our Network Dietitian would like to do this, very ambitious to think that all follow same nutrition guideline. The GIRFT ambition is that Networks have buying power, all units buying PN from a specific provider and therefore get it cheaper. NS updated that ULHT have gone for ready-made bag, so hard to standardise unless there are lots of standardised bags available. Manufacturers don’t have capacity, maybe aseptic issues nationally and until this is sorted going to be difficult to standardise anything. JG wondered if worth doing a stock take, for the Network to pull together where units get it from and what is in their basic stock bag. All to share where they get from and what is in it per		ALL

	100ml? standard bag/target at end/what is given to the baby. JG to ask Katie Hay for her thoughts.		JG
6.	Network Pharmacist Update Part of the Network long term plan is for a Network Pharmacist. Further updates will be provided as and when they are available.		
7.	<p>Monograph - Prostin The first Network monograph is Prostin which has been based on some existing guidance.</p> <p>The draft was circulated previously to the group and following the last meeting Adriece had sent a number of comments.</p> <p>LSH shared on screen the comments from Adriece which were worked through/discussed.</p> <p>LS agreed to make tweaks discussed and check/update the references this will then be recirculated to the group.</p> <p>The previous suggestions for monographs to be worked on:</p> <ul style="list-style-type: none"> • Insulin • Morphine • Atracurium • Dobutamine • Dopamine <p>Morphine next to be worked on. All to send local morphine monographs to LSH.</p> <p>Intubation drugs is maybe a wider piece of work with a trainee.</p>		<p>LS</p> <p>ALL</p>
8.	<p>Electronic Prescribing JG asked for any updates:</p> <p>ULHT rolling out electronic prescribing in adults, but the system chosen is only suitable for adults. Not even close to looking at electronic prescribing for neonates or paediatrics.</p> <p>UHDB bidding for new EPMA system and waiting on a decision.</p> <p>UHL using Nervecentre, but not rolled out to paediatrics. LS believes there have been conversations that it is not suitable for neonates and so looking at alternatives.</p>		
9.	<p>Significant Incidents & Shared Learning A phosphate infusion incident; where using high run rates, being aware that an acute correction of electrolyte needs more frequent monitoring</p>		

	When correcting any acute electrolyte abnormality must be careful about how this is done.		
10.	<p>AOB Adriecce had emailed with a couple of questions for the group. These were discussed and JG will reply to.</p> <ul style="list-style-type: none"> • Should this group include medical and transport representation? • Network pharmacist role <p>NS asked around use of Gaviscon; What does everyone else do, how is it made up, how often is it used? LA hasn't seen Gaviscon since started on the neonatal unit but will go away and check. LS maximum of 6 sachets per day.</p> <p>JG personal view is that it doesn't work and so doesn't prescribe it.</p> <p>JG agreed to send flow chart from UHL guidance to NS.</p> <p>LA asked about standardising Insulin sliding scale across the Network? JG thought the comment may have come from AWD based on it being on list of monographs for this group to review.</p> <p>LS asked about Chlorhexidine issue, still using pour bottles in UHL. NS managed to get 1% bottle in, diluting in equal parts 1:1 and then discarding straight away. LA RDH have 0.05% 10ml bottles back in stock.</p>		<p>JG</p> <p>JG</p>
11.	<p>Date/Time of Next Meeting 24 January 2024, 11:00am – 12:30pm via Microsoft Teams</p>		