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**Minutes from Advisory Group Meeting  
Tuesday, 26 May 2009  
Seminar Room 3  
Chancellor's Building, Little France**

Present: Professor David Webb, Prof Clin Pharmacol, University of Edinburgh (Chair)  
Professor Nick Bateman, Deputy Medical Director, SPIB and CARDS, RIE  
Melinda Cuthbert, Principal Pharmacist, YCC Scotland, RIE  
Sheila Noble, Senior Pharmacist, YCC Scotland, RIE  
Dr Simon Maxwell, Medical Director YCC Scotland, Senior Lecturer in Dept Clinical Pharmacol, University of Edinburgh  
Dr Sandy Sutherland, General Practitioner, Pathhead  
Asgher Mohammed, Community Pharmacist, Glasgow representing RPSGB in Scotland  
Professor Steve Hudson, Strathclyde Institute of Pharmacy and Biomedical Sciences  
Jane Harris, Teaching Dean, School of Nursing & Midwifery, University of Dundee  
Jane Murkin, National Co-ordinator Scottish Patient Safety Programme (Present for item 2.0 only)  
Thomas Sereghy, visiting Clinician from Czechoslovakia National Poisons Unit (present as a guest)

**1 Apologies for absence**

Apologies were received from Prof Tom MacDonald, Prof Peter Helms, Prof Pat Murray, Sonya Lam, Dr David Alexander, and Janice Watt.

**2 Collaborative working**

Jane Murkin attended by invitation to give a brief overview of the Scottish Patient Safety Alliance (SPSA) and the Scottish Patient Safety Programme (SPSP). This initiative comes under the NHS Quality Improvement Scotland and Institute of Healthcare Improvement umbrella. The main aim of the SPSP is to reduce adverse events by 30%. The SPSP focuses on processes and works in partnership with NHS professionals to support frontline staff to make changes in practice to help achieve a decrease in the occurrence of adverse events. There are 5 main work streams and one of these is medicines management.

A global trigger tool is used to aid in detection of possible adverse events. Jane Murkin to forward information on the global trigger tool to Melinda Cuthbert for onward distribution to the group.

**Action: J Murkin/ M Cuthbert**

At present SPSP focus is around acute services but will role out to primary care. The timescale for this role out is still to be agreed. Dr Maxwell enquired how YCC Scotland might best support and interact with the SPSA/SPSP initiative to promote/prevent ADRs. Jane Murkin said that it was still not too late to get involved but she would like YCC Scotland to develop a proposal on how we would propose to incorporate our aims into the objectives of the programme. YCC Scotland Management team to review SPSP programme information and draft a proposal for discussion.

**Action: YCC Scotland Team**

Jane Murkin suggested two additional alternatives as well:

- a. Approach Prof Sir John Savill directly with proposal to support quality improvement. Prof Sir John Savill is Head of the College of Medicine & Veterinary Medicine at the University of Edinburgh and is the current Chief Scientist. The Chief Scientist Office is responsible for encouraging and supporting research into health and healthcare needs in Scotland.
- b. Each health board is required to undertake pharmacovigilance planning. So might be worthwhile making contact with health boards directly across Scotland. Jane Murkin to send list of contacts for each health board.

**Action: J Murkin**

Prof Webb and Dr Maxwell enquired if there was a clinician working with the group who might be available to speak at the EACPT Pharmacovigilance seminar in July on the SPSA/SPSP. Jane Murkin suggested that Jason Leitch, a dental surgeon who is the National Clinical Lead for Patient Safety and Quality ([Jason.leitch@scotland.gsi.gov](mailto:Jason.leitch@scotland.gsi.gov) or Telephone: 07983 588042) might be the best person to approach.

**Action: Prof Webb/ Dr Maxwell**

Jane Murkin agreed to come again to a later meeting to discuss further once YCC proposal drafted. In the interim she would send the dates for the next SPSP event in Glasgow in November 2009.

**Action: J Murkin**

### **3 Minutes of previous meeting – 11 January 2007**

Accepted as a true and accurate record.

### **4 Matters Arising**

#### **4.1 Letter to MHRA regarding impact of limited dataset on tailoring education and training needs in Scotland**

This letter has not been drafted to date. Prof Webb felt that since one of the group's primary objectives was to drive education, we should write to the MHRA to say that supportive information to drive education programme within Scotland was lacking. Some items suggested for the letter were:

- a. Information on magnitude of ADRs
- b. Greater feedback (possibly individual to each reporter) on the Yellow Cards sent
- c. Highlighting of Black Triangle medicines on electronic GP systems

Melinda Cuthbert to have one last discussion with Mick Foy to see if any progress has been made on giving YCCs greater access to datasets to health board level since positive discussions had taken place prior for possibly obtaining these datasets from PCTs in England.

**Action: M Cuthbert**

If this is still not a possibility then she will draft letter for Prof Webb. Dr Sutherland offered to review draft letter.

**Action: M Cuthbert/Dr Sutherland/Prof Webb**

#### **4.2 Follow-up on letter to e-health director**

Further to Prof Bateman's initial letter, Dr Maxwell offered to follow up.

**Action: Dr Maxwell**

#### **4.3 Letter to Prof Stuart Murray regarding GP ADR training in Scotland**

Reply letter received from Prof Murray who advised that regional teaching is now minimal for GP speciality training but there are 18 training programmes Scotland wide. He said he would forward our correspondence onward for dissemination to the training programme directors. The group decided that

we should approach the Associate Dean for each Deanery across Scotland directly to reiterate the same offer communicated to Prof Stuart Murray.

**Action: Dr Maxwell**

#### **4.4 Circulation of ADR package and workshops to educational institutes**

Sheila Noble reported that letter sent to 27 education establishments within Scotland to ascertain uptake of materials. There were 9 responses from the educational institutions. Of these, 2 were forwarding onward and had no comments; 3 were using Power Point presentation and workshop; 1 had taken some of the slides; 1 had incorporated a lot of our data into their own presentations; 1 planning using for the next presentation; and 1 already had their own presentation but would review our presentation to see if could be used in any capacity in the future.

#### **4.5 Vamp Vision ADR reporting function**

Prof Bateman confirmed that Mick Foy was taking forward plans to embed a pre-populated Yellow Card into the functionality of Vamp Vision and the other prescribing GP programmes within England. Once this functionality is present in England it will also become available within whichever of these GP prescribing system the contract is awarded to in Scotland.

#### **4.6 Voluntary health Scotland**

Dr Maxwell advised he had contacted Voluntary health Scotland and he had agreement from them that they were willing to incorporate information on patient Yellow Card reporting into their brochures. Sheila Noble has drafted the content and awaits comments from Dr Maxwell before obtaining approval from the MHRA.

**Action: Dr Maxwell/ S Noble**

#### **4.7 Health board report format feedback**

Not discussed at meeting but only one reply received. It is asked that members provide any further comments to Melinda Cuthbert by 30 June 2009.

**Action: All**

### **5 Review of terms and conditions of Advisory Group**

There was discussion around the Roles and Functions of the Advisory Group (2002). Prof Webb felt that these terms should be reviewed. It was suggested that items 7 and 9 be removed; and Asgher Mohammed suggested that we might add 'Foster collaboration with other agencies within Scotland (e.g. SPSA)'. Dr Maxwell to update the document and re-circulate to group for comments.

**Action: Dr Maxwell**

### **6 Education and promotional strategy 2009-2010**

The strategy for YCC Scotland discussed briefly. Melinda Cuthbert to circulate via e-mail to invite comments from the group.

**Action: M Cuthbert**

### **7 MHRA generic ADR presentation**

The draft generic Yellow Card presentation prepared by the MHRA received the following comments:

- a. Slides a bit busy
- b. Some duplication in information between some slides
- c. Some of the examples used not idea

Melinda Cuthbert and Sheila Noble both have used the slides recently for two talks but had to amend/tailor for their own needs. Melinda Cuthbert to feed comments back to the MHRA on package. Once final slide package available it will be circulated to the group and put on the YCC Scotland website.

## **8 Meeting with Bill Scott**

Dr Maxwell informed the group that Melinda Cuthbert and himself had meeting with Prof Bill Scott on the 14 April 2009, which went well. Items discussed included current/recent work of the centre; collaboration with public health initiatives; lag-time to 'Dear Healthcare Professional' letters reaching prescribers; and future initiatives of the centre in collaboration with Scottish Executive Pharmacy Department/Community Pharmacy Public Health Campaign. Actions from the meeting include:

- a. Letter to Jackie Campbell, Head of Public Health regarding ADR reporting in Public Health campaigns. **Action: M Cuthbert/Dr Maxwell**
- b. Contact Alison Strath to discuss a possible ADR campaign via the community pharmacy public health platform for 2010-2011. **Action: M Cuthbert**
- c. Letter to CPO and CMO (to take to meeting with directors of medicine and directors of pharmacy) regarding 'Dear Healthcare Professional' letter dissemination. **Action: M Cuthbert/Dr Maxwell**

## **9 AOCB**

### **9.1 Training electronic Yellow Card**

Dr Maxwell stated that an electronic Yellow Card for training purposes was available from the MHRA. Melinda Cuthbert said that Mick Foy had given it to YCC Scotland specifically for the DOTS package and had indicated that he would like to monitor intended usage. The group felt that it would be beneficial to have available for wider training. Melinda Cuthbert to discuss with Mick Foy restrictions on usage and wider dissemination in Scotland for training; and will advise group subsequently.

**Action: M Cuthbert**

### **9.2 Long Term Conditions Alliance Scotland**

Sonya Lam (during a prior meeting with Melinda Cuthbert in January) had suggested that the Long Term Conditions Alliance Scotland (LTCAS) might be a useful group to approach to promote patient Yellow Card reporting. The LTCAS provides support and information to hundreds of voluntary and community organisations across Scotland that support or represent people living with long term conditions. Melinda Cuthbert to write to Audrey Birt, Chair of LTCAS to highlight patient Yellow Card reporting and offer to meet to discuss how YCC Scotland might best aid in promotion of patient reporting of ADRs to their organisation.

**Action: M Cuthbert**

### **9.3 YCCs Annual General Meeting**

The AGM took place on 15 April 2009. Prof Bateman said that Dr Maxwell (The DoH/BPS Prescribe Project - an opportunity to raise awareness of ADRs and pharmacovigilance amongst UK medical students) and Melinda Cuthbert (Scottish oncology healthcare professionals' attitudes and opinions on reporting of ADRs) had given presentations at this meeting that were well received. As well a draft annual report for 2008 was tabled on the day, which showed an increase in reporting from Scotland by 43% from 2007. This increase was seen from healthcare professionals and patients, however, until YCC Scotland have had an opportunity to look at the data in detail no further conclusions can be drawn.

## **10 Date and time of next meeting**

The next meeting will be held at 2pm on Tuesday, 12 January 2009 in Seminar room 5 of the Chancellors Building.

### Summary Action List

Item No	Item for Action	Responsible Individual
1	Forward information on the global trigger tool to Melinda Cuthbert for onward distribution to the group.	<b>J Murkin</b>
2	YCC Scotland Management team to review SPSP programme information and draft a proposal on how to incorporate our aims into the objectives of the programme.	<b>YCC Scotland Team</b>
3	Send list of contacts for each health board for pharmacovigilance planning.	<b>J Murkin</b>
4	Contact Jason Leitch as a possible speaker for EACPT conference on SPSA/SPSP.	<b>Prof Webb/ Dr Maxwell</b>
5	Send information for SPSP event in Glasgow in November.	<b>J Murkin</b>
6	Contact Mick Foy to see if any progress made on greater access to Scottish health board datasets for YCC Scotland.	<b>M Cuthbert</b>
7	Draft letter to MHRA for Prof Webb on limited dataset access.	<b>M Cuthbert/ Dr Sutherland/ Prof Webb</b>
8	Follow up to e-health director letter.	<b>Dr Maxwell</b>
9	Letter to Associate Deans for each Deanery in Scotland re: provision of therapeutics day (including ADRs) within GP speciality training.	<b>Dr Maxwell</b>
10	Confirm content on patient reporting for brochures produced by Voluntary Health Scotland.	<b>S Noble/ Dr Maxwell</b>
11	Feed back any comments on Health Board reports format to Melinda Cuthbert by 30 June 2009.	<b>All</b>
12	Draft of revised roles and functions of the Advisory Group	<b>Dr Maxwell</b>
13	Circulate YCC Scotland educational and promotional strategy to group to invite comments.	<b>M Cuthbert</b>
14	Feedback comment to MHRA on generic slide package.	<b>M Cuthbert</b>
15	Forward copy of finalised generic slide package to Advisory Group and publish to YCC Scotland website.	<b>M Cuthbert/ S Noble</b>
16	Letters to Jackie Campbell; and letter to CPO and CMO	<b>M Cuthbert/ Dr Maxwell</b>
17	Contact Alison Strath to discuss a possible ADR campaign via community pharmacy public health campaign for 2010-2011.	<b>M Cuthbert</b>
18	Discuss with Mick Foy the possibility of using the training electronic Yellow Card to a wider group than DOTs.	<b>M Cuthbert</b>
19	Letter to Long Term Conditions Alliance re: promotion of patient reporting.	<b>M Cuthbert</b>