

**Yellow Card Centre Scotland (YCCS) Advisory Board Meeting  
Wednesday 6<sup>th</sup> October 2021 Minutes**

<b>In Attendance:</b>		
Yvonne Semple	Director of Pharmacy, NHS Golden Jubilee (Chair)	
Sue Cole	Patient Representative	
Tracy Duff	YCCS, Lead Pharmacist	
Jane Harris	NHS Education for Scotland Nurses, Midwives & AHPs	
Scott Hill	Lead Pharmacist, ADTC Collaborative ( <i>left at 15:00</i> )	
Alexander Kiker	YCCS, Information Officer	
Susan Lloyd-MacGilp	Incident Reporting and Investigation Centre	
Simon Maxwell	YCCS, Medical Director	
Louise Summers	YCCS, Senior Pharmacist	
<b>Not Present:</b>		
James McLay	NHS Grampian	
Tom MacDonald	University of Dundee, Professor of Clinical Pharmacology	
<b>1</b>	<b>Apologies</b>	James Dear YCCS, Deputy Medical Director Karen Harkness Association of Scottish Medicines Information Practitioners Leon Zlotos NHS Education for Scotland, Pharmacy
<b>2</b>	<b>Membership</b>	<p><b>2.1: Microsoft Teams</b> – A Kiker has created a team on Microsoft Teams for Yellow Card Centre Scotland to which all members of the Advisory Group have been added. Going forward, all meetings will take place via this Microsoft Teams, and the agenda and papers for each meeting will be made available in the files section; for the time being, the agenda and papers also continue to be circulated prior to the meetings. Advisory Group meetings will be scheduled several months in advance and members will be sent meeting details in the form of calendar invitations.</p> <p><b>2.2: Membership</b> – The Advisory Group decided that additional representation is required from Directors of Pharmacy, Community Pharmacy, and General Practitioners:</p> <ul style="list-style-type: none"> <li>• Y Semple will contact the Directors of Pharmacy across NHS Scotland to identify a suitable representative willing to join the Advisory Group.</li> <li>• A Kiker will investigate Community Pharmacy networks through which a suitable Community Pharmacy representative can be identified.</li> <li>• A Kiker will investigate General Practitioner networks through which a suitable GP representative can be identified. It was noted that Andrew Buist, the chair of the Royal College of General Practitioners, could be contacted for suggested nominees.</li> </ul> <p>The Advisory Group Terms of Reference will be added to the agenda for the next meeting in March 2022 where they will be reviewed and updated.</p>
<b>3</b>	<b>Minutes of the Previous meeting</b>	<p><b>3.1: Accuracy</b> – The minutes from the previous meeting on <b>21<sup>st</sup> January 2021</b> were reviewed for accuracy and were accepted as a true and accurate record.</p> <p><b>3.2: Update on Action Points</b> – The Action Points from the previous meeting on 21<sup>st</sup> January</p>

		<p><b>2021</b> were reviewed and the following points noted:</p> <ul style="list-style-type: none"> <li>○ <b>3.2a:</b> S Cole has contacted the Scottish Women’s Institute (SWI) to discuss promotion of the Yellow Card Scheme during an upcoming SWI meeting, and will contact members of the YCCS team with further information once this is available.</li> <li>○ <b>3.2b:</b> The promotion of the Yellow Card Scheme through the National Acute Pharmacy Group Scotland (NAPS) will be picked up through communication with the Directors of Pharmacy.</li> <li>○ <b>4.1:</b> The YCS website has been updated with personal statements and images for members of the Advisory Group.</li> <li>○ <b>8.1:</b> Possible blog ideas were discussed at the last YCCS Management Board meeting, and S Maxwell has agreed to write the first blog article, which will be about pharmacovigilance in the era of COVID-19. An item to discuss potential blog articles will be added to the agenda for future meetings.</li> <li>○ <b>9.1:</b> Alyson Brown, the lecturer responsible for organising the Student Safety Champions initiative, no longer works for Robert Gordon University (RGU) and discussions regarding YCCS involvement have been paused. L Summers is in contact with a lecturer from RGU to organise teaching sessions provided by YCCS, and will raise the Student Safety Champion initiative for discussion during their next correspondence. Y Semple will be meeting with members of staff from the University of Strathclyde (UoS) and will raise the possibility of producing a Student Safety Champion initiative at Strathclyde as well. Additionally, YCCS provided Pharmacy undergraduate teaching at UoS in the past but no longer does so after Strathclyde moved to a new teaching model; Y Semple will also raise the possibility of once again involving teaching from YCCS for the Strathclyde Pharmacy undergraduate course.</li> <li>○ <b>10.1:</b> A suggestion was made in the previous meeting to look into the possibility of adding a message about the Yellow Card Scheme to the pharmacy note on prescriptions. This will be deferred to be discussed when the Advisory Group has both a Community Pharmacy and General Practitioner representative in its membership.</li> <li>○ <b>11.1:</b> The possibility of advertising the Yellow Card Scheme through promotional banners in health board area websites and online resources was going to be raised for discussion at the next Association of Scottish Medicines Information Practitioners (ASMIP) meeting. K Harkness was not present to provide an update, so this will be deferred to the next meeting in March 2022.</li> </ul> <p>All other relevant points from the previous meeting will be picked up on the agenda.</p>
4	<b>Matters Arising</b>	<p><b>4.1: HIS Patient Safety Initiative</b> – S Hill has contacted Julie Aitken, who has been involved in developing a patient safety strategy for Healthcare Improvement Scotland (HIS) alongside Simon Watson, regarding an opportunity to include the Yellow Card Scheme in the framework for this strategy. This has been raised for discussion with the executive team, and S Hill will continue to feed back on this when more information becomes available.</p> <p><b>4.2: MiDatabank Yellow Card Reporting</b> – K Harkness was not present to provide an update regarding MiDatabank Yellow Card Reporting, and T Duff advised that the ASMIP meetings have been focused on the changes that are underway to the training framework for pre-registration pharmacists. This will be reviewed again at the next Advisory Group meeting in March 2022.</p>

		<p><b>4.3: ADTC Collaborative Forum</b> – S Hill has organised an opportunity for members of YCCS to attend an upcoming Area Drugs &amp; Therapeutics Collaborative committee (ADTCC) meeting on Wednesday 3<sup>rd</sup> November 2021.</p> <p>The ADTCC provides a platform for local NHS Scotland health board Area Drugs &amp; Therapeutics committees (ADTCs) to come together to share information, advice on best practice, and developments within their local board areas that they wish to promote to other board areas. The meeting is well-attended by secretaries and/or chairs of ADTCs, typically with 30 to 40 individuals in attendance, and represents a valuable opportunity for YCCS to reach healthcare professionals from across Scotland, especially in the context of the upcoming publication of the YCCS Annual Report, and to encourage promotion of the Yellow Card Scheme through local ADTCs.</p> <p>S Hill will forward the invitation to T Duff, S Maxwell, and Y Semple who will attend the meeting on 3<sup>rd</sup> November on behalf of YCCS and will agree on a presentation to be given in a 15-minute time-slot at the meeting. In particular, it was noted that it would be helpful to have information for each of the individual NHS Scotland health board areas to present to the ADTCC to aid in the discussion.</p>
5	YCCS 2020/21 Data	<p><b>5.1: Annual Report</b> – T Duff presented a draft version of the YCCS Annual Report on the screen to the Advisory Group for information; this draft report still requires some additional information to be added, and will need to be approved by the YCCS Management Board and MHRA before it is distributed to healthcare contacts across Scotland. The MHRA has been contacted for advice regarding what specific information about COVID-19 vaccine reports that can be included, and we are currently waiting to hear back.</p> <p>The single most important fact to note is a very large increase in reports because of reports received for COVID-19 vaccines, despite an overall decrease of non-COVID reports compared to previous years. Due to limitations of the data available, because of the overwhelmingly large number of reports received for COVID-19 vaccines, YCCS cannot analyse this group of reports in great depth, and the main body of the report focuses on non-COVID reports.</p> <p>A summary of the available information was provided, specifically highlighting the following:</p> <ul style="list-style-type: none"> <li>• An overall decline in non-COVID reports reflects a decreased in these reports from all healthcare professional (HCP) reporter groups</li> <li>• A rise in reports from patient groups despite the decline in reports from HCPs</li> <li>• New cystic fibrosis medications (Ivacaftor, etc.) appear in the list of top 5 reported medications</li> </ul> <p>The Advisory Group discussed the benefits of patient reporting and noted that a review from 2020 showed that members of the public can report different information than healthcare professionals, often including: more detail about the symptoms and how they affect the patient's quality of life; more information about all suspected reactions, not just those that are considered serious; and reports for over-the-counter medicines as well as</p>

		<p>herbal products and supplements.</p> <p>Specific feedback about the front page summary for the annual report was noted:</p> <ul style="list-style-type: none"> <li>• It should be made explicitly clear that the number of COVID-19 vaccine reports is separate from the non-COVID reports</li> <li>• It should be made clear that the information for top reported medicines and source of reports does not include reports for COVID-19 vaccines</li> <li>• A disclaimer regarding the limitations of the information should be added to the front page, highlighting the fact that reports are only for <i>suspected</i> adverse drug reactions</li> </ul>
6	<b>Incident Reporting &amp; Investigation Centre (IRIC) update</b>	<p>S Lloyd-MacGilp provided an update on IRIC reporting for 2021, and the following points were noted:</p> <ul style="list-style-type: none"> <li>• IRIC saw an increase in the number of reports during the last 12 months compared to the previous 12 months, as elective surgeries have started again and lockdown restrictions have eased from the beginning of the pandemic</li> <li>• IRIC received a total of 121 adverse incident reports from the MHRA, 76 of which (63%) were from members of the public, and 45 of which (37%) were from healthcare professionals</li> <li>• A large number of reports to IRIC from the MHRA involved medical devices relating to COVID-19, including 53 reports (44%) involving PCR &amp; lateral flow test kits, and 18 reports (15%) involving surgical face masks</li> <li>• The number of reports submitted to IRIC from the MHRA has increased by 110% (from 55 to 121) compared to the previous year, accounting for 27% of all adverse incident reports to IRIC (121 out of 448 total reports)</li> <li>• Total reporting of adverse incidents to IRIC also increased, with a rise of 28% (from 352 to 448)</li> <li>• The vast majority of reports from the MHRA regarding PCR &amp; lateral flow test kits involved product complaints rather than actual adverse incidents, such as missing components, or broken security seals, etc.</li> <li>• Additionally, in those reports that were related to an actual adverse incident, not enough information was provided to identify the component of the kit that caused the incident</li> <li>• The ongoing issue of underreporting of adverse incidents to medical devices was noted, and is a problem that is shared by the Yellow Card Scheme</li> </ul> <p>In addition to the update on IRIC reporting, S Lloyd-MacGilp confirmed that incidents involving algorithms and medical apps should also be reported directly to IRIC, but there is significant underreporting in this area. S Maxwell noted that he has observed a number of incidents involving algorithms and apps, and there seems to be a discrepancy in reports that are being submitted and those that are being received by IRIC. The Advisory Group also noted that home blood pressure monitors would be a good area to report, and may be an</p>

		area that could be considered for increasing awareness.
7	<b>Social Media</b>	<p><b>7.1: Twitter Update &amp; Top Tweets</b> – The top ten tweets from 2021 so far were reviewed and discussed. Tweets are written by A Kiker and then reviewed by T Duff and L Summers for approval before they are published. The Advisory Group agreed that engagement with existing promotional events is a good way to make our messages relevant and reach a wider range of people. YCCS is always looking for ideas of topics and themes that can be communicated via Twitter, and the following ideas were noted:</p> <ul style="list-style-type: none"> <li>• Pharmacy Technician Day 18<sup>th</sup> October would be a good candidate for YCCS to target with a focused tweet</li> <li>• Following the discussion around the IRIC report, a tweet around the importance of reporting faulty devices would help raise awareness of this reporting need in Scotland</li> <li>• The week beginning 11<sup>th</sup> October 2021 is Clinical Pharmacology week, and is an opportunity for YCCS to engage with healthcare professionals via Twitter</li> <li>• S Maxwell will be hosting an educational seminar aimed at Junior Doctors and Undergraduate Medical Students on Adverse Drug Reactions and Polypharmacy on Tuesday 12<sup>th</sup> October 2021; YCCS will retweet promotion for this event</li> <li>• YCCS should liaise with communications teams at NHS Scotland healthboard areas to become involved in various health promotion campaigns, including the national communications group for NHS Scotland. Y Semple will speak with the head of communications at NHS Golden Jubilee, and T Duff will speak with the head of communications for NHS Lothian to determine scope for collaboration</li> </ul> <p>Additional suggestions from the Advisory Group for messages that can be delivered through social media would be greatly appreciated, and can be emailed at any time to A Kiker.</p> <p><b>7.2: YCCS Facebook Page</b> – A suggestion was raised at the last Advisory Group meeting in January 2021 to investigate the possibility of creating a YCCS Facebook Page to promote the Yellow Card Scheme on this social media platform. The YCCS Management Board discussed this at the last meeting and noted concerns that it would be used as a platform for complaints and the spreading of misinformation if it is not rigorously monitored, and would require a significant investment of time from members of staff at YCCS. For these reasons the Management Board did not support the creation of a YCCS Facebook Page at this time.</p>
8	<b>Resources and Promotion</b>	<p><b>8.1: YCCS/NES ADR module update</b> – All of the existing ADR e-learning modules have been transferred to the new Storyline 360 platform and are currently live on Turas Learn. No updates to the content of the modules have been implemented yet, and this will be the next priority for the YCCS Management Board.</p> <p>The Advisory Group was made aware of a concern regarding the accessibility of the modules, as all users must now create an account on Turas Learn in order to view these modules, especially as YCCS wants to encourage use of these modules outside of NHS Scotland. There were concerns from the YCCS Management Board that having to login for</p>

		<p>access to content may deter users from accessing the ADR modules, as users may not wish to create an account if they do not already have one just to access these modules.</p> <p>S Lloyd-MacGilp will attempt to access the modules on Turas Learn and provide feedback on the ease and accessibility of the modules to A Kiker which can be used to inform how these modules are advertised and linked to.</p> <p>J Harris advised that anyone can create an account on Turas Learn, as there are no restrictions for allowed users, but will discuss the issues surrounding Turas accessibility with L Zlotos to determine what options are available to make these modules as accessible as possible. The Advisory Group noted that ongoing advertising of Turas Learn across NHS Scotland would be helpful.</p>
9	<b>Student Engagement</b>	<p><b>9.1 YCCS Webinars for Higher Education</b> – L Summers and T Duff have produced presentations that can be provided for online teaching, but noted that the formats used for online teaching change frequently making it difficult to pursue pre-recorded lectures. It was also noted that providing live presentations, either virtually or face-to-face, is more valuable than pre-recorded lectures, especially as the discussion at the end of the presentation is often the most valuable part of the lecture, and being able to customize content for each teaching group can provide a more-engaging presentation.</p> <p>T Duff will provide table for the next Advisory Group meeting of all teaching conducted by YCCS to identify any gaps or areas that could be targeted for additional teaching. Because YCCS is a small team with limited time it will be important to highlight the most valuable areas for teaching and focus on these areas, and to use the available teaching time where it will be most beneficial. The primary groups with which YCCS is currently involved in teaching are: medical students; non-medical prescribers; pharmacy undergraduates; podiatrists; chiropractors; patient groups. Currently patient groups are the most difficult for the team to reach, particularly at the moment because of COVID-19 restrictions. YCCS also has an objective to target groups where reporting is low, and engagement with GPs and primary care pharmacy groups would be ideal targets for promotion and education to increase reporting in these reporter groups. J Harris will extend an invitation to members of the Yellow Card team to attend the Prescribing Group meetings, to further develop non-medical prescriber teaching.</p> <p>S Maxwell will produce a pre-recorded pharmacovigilance lecture as part of his University of Edinburgh teaching role which will be available for anyone to access via the internet. As this is part of his university teaching it will not be specifically noted as affiliated with YCCS, but can be advertised and linked to through YCCS channels.</p> <p><b>9.2 Ideas for 2021/22</b> – Y Semple will speak with teaching staff at UoS to propose that staff from YCCS could once again be involved in teaching for the Strathclyde Pharmacy undergraduate course.</p>
10	<b>Patient Engagement</b>	<p><b>10.1: Ideas for 2021/22</b> – The following ideas for events and engagement in the year 2021/22 to increase Yellow Card reporting from patient groups were discussed:</p> <ul style="list-style-type: none"> <li>• The addition of community pharmacy and GP representatives on the Advisory Group will be useful for generating and assessing ideas to increase patient engagement</li> <li>• S Cole has contacted the Scottish Women’s Institute (SWI) regarding the</li> </ul>

		<p>opportunity for YCCS to provide a presentation on the Yellow Card Scheme and ADRs during one of their meetings. Many groups are still meeting online at the moment, and a program can be circulated to SWI members in Scotland. S Cole is currently waiting for a reply with details of meetings and will forward this information to A Kiker once it is received.</p> <ul style="list-style-type: none"> <li>• S Cole noted that there are currently no leaflets in GP surgeries for patients to read while they are waiting, and this could represent an opportunity for YCCS to disseminate information to promote the Yellow Card Scheme, although it was noted that paper leaflets may no longer be provided because of COVID-19 restrictions.</li> <li>• Working with NHS 24 or NHS Inform would be greatly beneficial in helping YCCS reach patients and patient groups. J Harris will provide a list of appropriate contacts for NHS 24 and NHS Inform and YCCS will reach out to discuss a potential collaboration.</li> <li>• S Cole is involved in public engagement for an NHS 24 Strategic Review and noted that there is no mention of the Yellow Card Scheme at present, but will investigate this further feedback to the YCCS team</li> <li>• Y Semple will contact the Director of Pharmacy for NHS 24 to ask whether potential adverse drug reactions are part of the algorithm for call handlers at NHS 24, and if not to discuss whether this is something that would be worth considering for inclusion</li> <li>• The care sector was suggested as a potential key area to target for raising awareness of adverse drug reactions and the Yellow Card Scheme, as both patients and care-workers in places such as care homes might be able to identify potential adverse drug reactions. It may be worth considering representation on the Advisory Group from social care or the independent sector as a whole. This will be discussed at the next Advisory Group meeting alongside the update to the terms of reference.</li> <li>• A consultation for a National Care Service for Scotland has been proposed within the Scottish Government, and sets out improvements to how social care is delivered in Scotland. There may be opportunities through this to raise awareness of ADRs and the Yellow Card Scheme.</li> </ul>
11	<b>Healthcare Professional Engagement</b>	<p><b>11.1: Ideas for 2021/22</b> – The following ideas for events and engagement in the year 2021/22 to increase Yellow Card reporting from healthcare professionals were discussed:</p> <ul style="list-style-type: none"> <li>• To increase the reach of YCCS among primary care healthcare professionals, community pharmacy and GP representation will be considered for the Advisory Group going forward; this will be discussed at the next Advisory Group meeting alongside the update to the terms of reference</li> <li>• Many GP practices in England have full Yellow Card reporting functionality integrated into their patient management software; currently only the Vision software has this functionality in Scotland, and talks are currently ongoing between the MHRA and EMIS Health. T Duff will request an update on this from the MHRA to feedback to the Advisory Group at the next meeting</li> </ul>
12	<b>Any Other Business</b>	<p><b>12.1: Advisory Group Update to Management Board</b> – The Advisory Group will review how feedback from meetings is provided to the Management Board going forward. Y Semple has been invited to attend YCCS Management Board meetings to provide an update and insight from the Advisory Group, but will not be expected to attend every Management Board</p>

		<p>meeting. The process for providing feedback to the Management Board will be updated and formalised at the next meeting as part of the update to the Terms of Reference.</p> <p><b>12.2: Full Fact Data</b> – S Cole shared an article from a website called Full Fact that highlighted the risks of misusing information from the Yellow Card Scheme, and pointed to increased visibility of warnings on the misuse of data on the Yellow Card Scheme website. This was noted by the Advisory Group, and all members were asked to keep an eye out for the misuse of Yellow Card reporting data, especially that which claims to be from the MHRA, and forward details to A Kiker so this can be provided to the MHRA.</p>
<b>13</b>	<b>Next meeting</b>	The date and time of next meeting will be confirmed for March 2022, and will be circulated as a calendar invitation once finalised.