



Minutes of the **Medicines Programme Board** held via Microsoft Teams, on **Wednesday, 28th February 2024.**

Present:	Dr Andrew Tresidder (AT)	Chair, NHS Somerset GP Patient Safety Lead
	Peter Berman (PB) Hels Bennett (HB) Dr Orla Dunn (OD)	Lead Lay Representative Medicines Manager, NHS Somerset Consultant in Public Health, Somerset County Council
	Shaun Green (SG)	Deputy Director of Clinical Effectiveness and Medicines Management, NHS Somerset
	Sam Morris (SM)	Medicines Manager, NHS Somerset
	Joanne Nicholl (JN)	Designated Doctor Safeguarding Children, NHS Somerset
	Andrew Prowse (AP)	Director of Pharmacy, SFT
	Emma Russell (ÈR)	CLIC Representative
	Yvonne Lamb (YL)	Engagement Officer, LPC
	Karina Morgan (KM)	Neonatal Dietitian, SFT
	Dr Val Sprague (VS)	Bridgwater Representative
	Zoe Talbot-White (ZTW)	Prescribing Technician, NHS Somerset
	Mihaela Tirnoveanu (MT)	Taunton Representative
	Emma Waller (EW)	Yeovil Representative
Apologies:	Bernice Cooke (BC)	Deputy Director Nursing and Inclusion Patient Safety Specialist, NHS Somerset
	Dr David Davies (DD)	West Somerset Representative
	John Digman (JD)	South Somerset West Representative
	Esther Kubiak (EK)	Medicines Manager, NHS Somerset
	Dr James Nicholls (JN)	West Mendip Representative
	Laura Picton (LP)	Community Pharmacy Clinical Lead, NHS Somerset
	Dr Dah Tinnin (DT)	IMC Depresentative

Dr Rob Tippin (RT)

LMC Representative

1 APOLOGIES AND INTRODUCTIONS

AT welcomed everyone to the Medicines Programme Board. Introductions for Joanne Nicholl, Designated Doctor Safeguarding Children, NHS Somerset and Karina Morgan, Neonatal Dietitian, SFT. Apologies were provided as above.

2 REGISTER OF MEMBERS' INTERESTS

2.1 The Medicines Programme Board received the Register of Members' Interests relevant to its membership.

The Medicines Programme Board noted the Register of Members' Interests.

3 DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

3.1 Under the NHS Somerset's arrangements for managing conflicts of interest, any member making a declaration of interest is able to participate in the discussion of the particular agenda item concerned, where appropriate, but is excluded from the decision-making and voting process if a vote is required. In these circumstances, there must be confirmation that the meeting remains quorate in order for voting to proceed. If a conflict of interest is declared by the Chairman, the agenda item in question would be chaired by a nominated member of the Medicines Programme Board.

There were no declarations of interest relating to items on the agenda.

4 MINUTES OF THE MEETING HELD ON 24th January 2024

4.1 The Minutes of the meeting held on 24th January were agreed as a correct record.

4.2 **Review of action points**

Most items were either complete or, on the agenda. The following points were specifically noted:

Ask other PCNs if they have similar accuRx messages for prescribing over-thecounter medicines in nurseries and schools. **Action: SM**

5 Matters Arising

- 5.1 Update on Wegovy Pilot Pilot is still in planning and discussion phase, awaiting NICE decision on Tirzepatide.
- 5.2 Scorecard proposals for 24-25

Majority of scorecard indicators will stay the same.

The changes for 2024/25 are:

- Practice achieving all their national antimicrobial prescribing targets and has an identified sepsis lead – Updated targets duration of treatment for doxycycline and amoxicillin.
- 2. solifenacin and oxybutynin IR as a % of total incontinence drugs Reintroduced
- 3. Carbon Footprint indicator (salamol/airomir and refills) New
- 4. Generic Sitagliptin % all Gliptins New
- 5. Reduction in H2RA prescribing New
- Cost effective HRT prescribing (Gepretix + generic Estradiol 10microgram pessaries. - New
- -MPB agreed
- 5.3 Valproate:
 - Important new regulatory measures for oversight of prescribing to new patients and existing female patients
 - Updated Shared Care Protocol

The Somerset ICB valproate shared care protocol has been put together with collaborative working at great speed, ensuring all necessary information from all specialities has been included along with ethical considerations. A national shared

care protocol was not possible. It will be shared regionally. Thank you to all involved for their work on this.

Suggest MCA wording for the shared care protocol webpage. Action: JN -MPB Approved Add to website.

Action: Daniela Broughton

5.4 [TA937] Targeted-release budesonide for treating primary IgA nephropathy The payment mechanism for the technology is determined by the responsible commissioner and depends on the technology being classified as high cost. Approved this NICE TA at the last MPB meeting. It is expensive but not listed in high cost PBR drugs. Due to the cost, proposal to treat as locally agreed high-cost drug. -MPB agreed

Inform contracting.

Action: SG

5.5 National Medicines Optimisation Opportunities Dashboard In the December data Somerset is best performing in the region against national measurements. More work is needed for course length of ABX prescribing. Deemed national average for quality on Valproate prescribing however because of all the work done on this it isn't an issue. National measure not done on quality. -Noted

6 Other Issues for Discussion

6.1 Generic savings letter

Guidance remains the same, recommend generic prescribing when cost effective. Balancing patient centred care and supporting GPs in primary care. However, may affect viability of community pharmacy when generics aren't available. Consider impact this may have on already struggling community pharmacy. Make changes and bring back to March meeting for final sign off. Action: EK

6.2 NHS England: Improving the physical health of people living with severe mental illness. Revised Lester Tool. Looking at patients with SMI and ensuring they receive physical health checks every year. Ensure discussed at Mental Health meeting on 12/3/24. -Noted

7 Other Issues for Noting

- 7.1 Mirena coil – New duration of use – 8 years in the UK Updated links in formulary. Significant demand within SWISH, up to a year wait for non-contraception indicated fittings. In early-stage discussions to increase provisions by way of satellite nurses moving around PCNs. LMC are discussing discrepancy for rates of pay for inserting LARCS. Somerset benchmark poorly on cervical screening.
- 7.2 Important Update: Transition to updated metoject® PEN Change of device information has been distributed. SG has informed the company manufacturing metoject, that for a drug as significant as methotrexate they should be

contacting the GPs and pharmacies themselves. This has also been raised nationally.

8 Additional Communications for Noting

- 8.1 Coroner's report and Opioid PLUS gabapentinoid prescribing data Email from Helen Spry – 24/01/24
 -Noted
- 8.2 Inclisiran is available from the wholesaler (AAH ONLY) at £45 (Nominal Charge) Email from SG 25/01/24
 Green on formulary, SPC states 'Inclisiran is intended for administration by a healthcare professional'. Unsure if this should be with primary care so has been taken to LMC for advice. On LMC agenda raised nationally and locally.
 -Noted
- 8.3 Sepsis guidance updated January 2024 Email from Helen Spry 01/02/24 -Noted
- 8.4 Mounjaro Tirzepatide for Type 2 diabetes Email from SG 15/02/24 -Noted
- 8.5 Reducing anticholinergic burden (ACB) practice data Nov 2023 Email from HB 15/02/24
 -Noted
- 8.6 Scorecard antimicrobial data 12 months to December 2023 Email from Helen Spry – 19/02/24
 -Noted
- 8.7 Ondansetron safety update Email from SG 20/02/24
 Approved off license for patients with severe HG. Contained within the pathway. Will not be changing TLS to Red drug.
 -Noted
- 8.8 Shortage of salbutamol nebules National Patient Safety Alert Email from Steve Moore – 27/02/24
 -Noted

9 Formulary Applications

9.1 Cytisine 1.5mg tablets (Consilient Health Ltd) for Smoking cessation This is better than placebo.
Budget for smoking cessation sits with public health. There are initial reservations due to the 25-day course and that the complex dose schedule might affect compliance. The LPC are looking into this drug its use in other areas and what training would be needed for pharmacist in Somerset. Still no date for champix. -Bring back in March.

- 9.2 Nutriprem breastmilk fortifier KM joined to discuss. Nutriprem supports breastfeeding. Previously patients needed to collect from the trusts. Product now in drug tariff. Proposal to add to formulary for small number of patients under dietetic care. Only prescribed for 3–6-month period. Will be discharged with reasonable amount. -MPB agreed. Add to TLS AMBER no official shared care. Action: ZTW Include on the infant feeding page.
- 9.3 Slynd 4mg tablets, drospirenone, Exeltis UK Ltd. New progestogen-only pill. More expensive than others on formulary however does have uses favourable for some patients. Risk of CKD or kidney injury risk. Proposal to add to formulary as last line.
 -MPB agreed. Add to formulary.

10 Reports From Other Meetings Feedback

10.1 **Primary Care Network Feedback** Progress updates on:

- Structured medication reviews
 - Deprescribing
 - Social prescribing options e.g., Pain, sleep etc.
 - PCN workforce

Nothing to note this month

Summary

10.2 **Community Pharmacy Somerset Report**

- Already had 2184 referrals via GPs (excludes 111).
- Low numbers of unactioned referrals which shows they aren't being left waiting.
- NHS Somerset ICB paid for referral button on EMIS which seems to have helped make the process easier.
- Despite workforce and workload issues in community pharmacy they are still making time to do this.
- Capture learning and move forward with it.

Add pharmacy first good news story to newsletter. Pass back thanks to contractor colleagues. Action: EK Action: SG

10.3 LMC Report

Nothing to note

10.4 Somerset NHS Foundation Trust D&TC Meeting – Next meeting TBC

- 10.5 **Somerset NHS Foundation Trust Mental Health Medicines Group** Next meeting 12/03/24
- 10.6 **Somerset NHS Foundation Trust Medicines Governance Committee** Next meeting TBC
- 10.7 Regional Medicines Optimisation Committee South West Next meeting TBC

Part 2 – Items for Information or Noting

- 11 Current Performance
- 11.1 **High-cost drug budget exception reporting** Nothing to note this month
- 11.2 November Scorecard Trend

Despite pressures in primary care, progress is being made and the trend is improving.

Somerset is the only system in country looking at the other potentially teratogenic drugs and need for contraception. This has put us ahead and we are now green on the scorecard. Well done to Sam Morris and everyone that is working on this.

Reduction in Calcium, vit D alone or combo prescribing scorecard indicator search won't detect patients given zoledronic in secondary care unless it is coded correctly in the practice.

11.3 February Prescribing Report

SG presented the December data:

- Forecast £101million spend against £96million budget. GP oral contraception, vaccines and treating addiction charge back will help
- Been able to meet over prescribing from other budgets.
- Somerset now has 604,052 patients. Average age 7 years older bringing additional clinical comorbidities and associated prescribing.
- Benchmarking overall best 10% of all ICB in lots of areas.
- Practices reviewing alerts on eclipse will be improving outcomes.
- Great news on pharmacy first.

-Noted

12 Rebate Schemes

12.1 Dimaz and Codimaz, Scope Ophthalmics Limited

Commence date: 01/04/24 -Noted

13 NICE Technology Appraisals

- 13.1 [TA945] Treosulfan with fludarabine before allogeneic stem cell transplant for people aged 1 month to 17 years with non-malignant diseases
 Terminated appraisal
 Add to TLS 'Not recommended'.
- 13.2 [TA948] Ivosidenib for treating advanced cholangiocarcinoma with an IDH1 R132 mutation after 1 or more systemic treatments

This technology is commissioned by NHS England. Providers are NHS hospital trusts.

Add to TLS 'Red drug'.

- 13.3 [TA947] Loncastuximab tesirine for treating relapsed or refractory diffuse large B-cell lymphoma and high-grade B-cell lymphoma after 2 or more systemic treatments This technology is commissioned by NHS England. Providers are NHS hospital trusts. Add to TLS 'Red drug'. Action: ZTW
- [TA951] Olaparib with abiraterone for untreated hormone-relapsed metastatic 13.4 prostate cancer This technology is commissioned by NHS England. Providers are NHS hospital trusts. Add to TLS 'Red drug'. Action: ZTW
- [TA950] Nivolumab-relatlimab for untreated unresectable or metastatic melanoma in 13.5 people 12 years and over This technology is commissioned by NHS England. Providers are NHS hospital trusts. Add to TLS 'Red drug'.
- 13.6 [TA949] Belumosudil for treating chronic graft-versus-host disease after 2 or more systemic treatments in people 12 years and over This technology is commissioned by NHS England. Providers are NHS hospital trusts. Add to TLS 'Red drug'. Action: **ZTW**
- 13.7 [TA952] Talazoparib for treating HER2-negative advanced breast cancer with germline BRCA mutations This technology is commissioned by NHS England. Providers are NHS hospital trusts. Add to TLS 'Red drug'.
- 13.8 [TA956] Etrasimod for treating moderately to severely active ulcerative colitis in people aged 16 and over This technology is commissioned by integrated care boards. Providers are NHS hospital trusts. Add to TLS 'Red drug'. Action: ZTW

14 System NICE Implementation Risks

- 14.1 ICB & Trusts Nothing to note this month
- 14.2 NICE guidance implementation position Nothing to note this month

15 **NICE Clinical Guidance**

15.1 Update [NG188] COVID-19 rapid guideline: managing the long-term effects of COVID-19

Action: ZTW

Action: ZTW

Action: ZTW

Transferred the guideline from the MAGICapp platform to the NICE website, changing the presentation. The recommendations are unchanged. -Noted

- 15.2 Update [NG192] Caesarean birth Reviewed the evidence and made new and updated recommendations on placenta accreta spectrum. -Noted
- 15.3 Update [NG51] Suspected sepsis: recognition, diagnosis and early management New recommendations on risk evaluation and management of suspected sepsis for people aged 16 or over who are not and have not recently been pregnant, in mental health, ambulance and acute hospital settings. This covers the population and settings in which NEWS2 applies. -Noted
- 15.4 Update [NG33] Tuberculosis

MHRA published a DSU on fluoroquinolone antibiotics. These must now only be prescribed when other commonly recommended antibiotics are inappropriate. NICE is assessing the impact of this warning on recommendations in this guideline. Section on preventing TB, removed family history of TB in the past 5 years from the list of criteria for BCG vaccination in neonates in low-incidence areas, to align with the chapter on tuberculosis in the Green Book. -Noted

16 Medicines Safety Summary

- 16.1 MHRA Drug Safety Update:
 - Codeine linctus (codeine oral solutions): reclassification to prescription only medicine
 - Pseudoephedrine: very rare risk of posterior reversible encephalopathy syndrome (PRES) and reversible cerebral vasoconstriction syndrome (RCVS)

NPSA

• Shortage of salbutamol 2.5mg/2.5ml and 5mg/2.5ml nebuliser liquid unit dose vials

CAS

• Valproate: important new regulatory measures for oversight of prescribing to new patients and existing female patients

Prevention of future death report

- Alcohol and self-medication for PTSD 07/02/2024
- Clozapine and alcohol 15/02/2024
- Inadvertently overdosed on fentanyl 14/2/2024
- Overprescribing of zopiclone 23/2/2024

-Noted

Clozapine clinic to highlight co-prescribing and alcohol intake risks. Gap around red drug coding in primary care.

Find the data on eclipse and take to mental health medicines group. Action: SM

Synchronising quantities would help reduce over supply, along with adjusting prescriptions for special container drugs.

17 Risk Review and Management

Trusts ICB -Nothing to note this month

18 Any Other Business

- 18.1 Joint Formulary
 Ongoing discussion around one uniform formulary for the system. Previous barriers
 have been funding and resources.
 Update at the next MPB.
- 18.2 Formulary Applications
 Formulary applications made at MPB should have formal process and completed
 paperwork to be able to make best informed decision.
 Share DTC application form for amendment and use.
- 18.3 Clinical effectiveness post The post is funded by NHS England. It is Trust based working with Primary Care too. Somerset was the only system in the South West that didn't have the role. Interviewed and appointed last week. Once confirmed will share details.

18.4 Fostair supply from hospital Hospitals have national procurement lists which wont always align with our formulary.

Dermatology is also prescribing non-formulary creams. This is acceptable if the patient has tried the formulary choices, and it has been recommended by a specialist.

DATE OF NEXT MEETINGS

27th March 2024 (SIMO following)
24th April 2024
22nd May 2024 (SIMO following)
26th June 2024
24th July 2024 (SIMO following)
25th September 2024 (SIMO following)
23rd October 2024
27th November 2024 (SIMO following)