

NENC Medicines Committee

Minutes of the meeting held on the 20th December 2022, 9-11am

Virtual meeting

Present:

Name	Position	Representing	September	October	December
Ewan Maule (EM)	ICB Director of Medicines and Pharmacy	Chair	✓	✓	✓
Janet Walker (JW)	ICB Medical Director representative	ICB Medical directorate (Vice Chair)	✓	✓	✓
Claire Bradford (CB)	ICB Medical Director representative	NTAG (Chair)	✓	✓	✓
Sarra Seldon (SS)	ICB Community Pharmacy Clinical Lead	NENC Community Pharmacy	✓	✓	✓
Tim Donaldson (TD) (or Chris Williams CW)	Mental Health Trust Chief Pharmacist	NENC Mental Health Trusts	✓ CW	✓ TD	✓ TD
Paul Fieldhouse (PF) (or other Acute Trust Chief Pharmacist)	North Cumbria Trust Chief Pharmacist	NENC Acute Trusts	✓	✓ DC	✓ PF
Rosie England (RE)	NEAS Chief Pharmacist	North East Ambulance Service	✓	✓	✓
Julia Young (JY) (or Louise Mason Lodge LML)	ICB Nursing Director	ICB Nursing directorate	✓ JY	✓ JY	✓ JY
Charles Welbourn (CW)	ICB Director of Finance	ICB Finance directorate	✓	✓	✓
Lynn Wilson (LW)	ICB Director of Place representative	ICB Place directorate	✓	✓	Kirsty Sprudd
Ian Morris (IM)	Senior Primary Care Pharmacist	Primary Care Medicines Optimisation Teams	✓	✓	✓
Vacant	NHSE Public Health Commissioning representative				
Claire Jones (CJ)	Public Health Pharmacist	NENC Public Health - Pharmacy	A	✓	A

Vacant	Social Care representation	NENC Social Care			
Robin Mitchell (RM)	Clinical Director, NENC Clinical Network	Strategic Clinical Networks	✓	✓	✓
Christine Rowlands	Spectrum CIC	Health & Justice			✓
Will Horsley (WH)	NHSE Specialised Commissioning	Specialised Commissioning	✓	A	✓
Michele Cossey (MC)	NHSE Regional Chief Pharmacist	NHSE Regional Pharmacy and Medicines	A	A	A
Chartnel Clark	NICE associate				✓
Vacant	Lay representative				
Monica Mason (MM)	Head of Prescribing Support	Regional Drug and Therapeutics Centre (Professional Secretary)	✓	✓	✓
Gavin Mankin (GM) or Dan Newsome (DN)	Principle Pharmacist	Regional Drug and Therapeutics Centre	✓ GM & DN	✓ GM	✓ GM
Helena Gregory					✓

1) Introductions and declarations of interest

Apologies were received as detailed above, the meeting was quorate, and no declarations of interest were received.

2) Minutes of the previous NENC meeting (Oct 22)

The minutes were approved, the committee await authorisation from the ICB executive to publish. A further meeting with the ICB governance lead has been arranged for January.

3) Update from ICB executive meeting (13/12/22)

EM explained that the draft terms of reference for the medicines committee, and its medicines optimisation subcommittee (NTAG) had been presented to the executive for approval. Whilst the executive was very supportive of what was proposed under current ICB governance arrangements the executive cannot establish a subcommittee, this matter will be taken to the ICB board for a decision.

The committee discussed the responsibility of the ICB in the timely implementation of NICE technology appraised medicines, and the role of Trusts in making these treatments available, within current funding. EM confirmed that this committee will continue to make

recommendations to the ICB executive, who do not wish to delay decision-making, but also need to ensure equitable access to medicines across the whole NENC population.

Action: EM to update the committee following ICB board consideration

4) NENC Compliance with ICB commissioned NICE technology appraisals

MM presented a report prepared on behalf of the medicines committee which seeks to provide the ICB executive with a more detailed position on compliance of the NENC ICB with NICE technology appraised treatments, and future plans to improve equitable commissioning of these medicines across the NENC.

The paper highlighted the current position and likely barriers to implementation of NICE technology appraised medicines and sought to introduce a new process to support the equitable access of these medicines to the NENC population.

The committee recognised the barriers to implementation presented in the paper and discussed the extent to which the proposed processes could improve equitable access to treatments across NENC. This included an ICB wide consultation to confirm the system's readiness to provide a treatment within the NICE 90-day timeframe. It was suggested that improvements to horizon scanning be undertaken to support systems in planning for the entry of NICE treatments, and the paper be amended to capture this.

The committee approved this paper for submission to the ICB executive

Action: MM to submit to ICB executive

5) NTAG November 2022 Recommendations for Ratification

GM provided the committee with a recap of the recommendations made by NTAG since the inception of the ICB in July. The committee were asked to approve for submission to the ICB executive, the NTAG recommendations which includes ICB commissioned NICE TAs issued in August, September and October 2022, and additional ICB wide recommendation from NTAG's November 2022 meeting. The committee approved these recommendations for submission to the executive for approval in line with the current governance arrangements.

Action: MM to submit to executive

6) Area Prescribing Committees of the NENC ICS: Decisions for ratification

Decisions from County Durham and Tees APC (Nov 22), North of Tyne, Gateshead and north Cumbria APC (Oct 22) and South Tyneside and Sunderland APC (Dec 22) were noted by the committee and will be submitted to the ICB executive for approval.

Action: MM to submit to the ICB executive

7) NENC Formulary: plan for implementation

IM presented a report to update the committee on the progress being made by the formulary working group in the development of a single formulary for the NENC. The group heard that discussions continued with APC chairs as to a timeline for the launch of the formulary, the phased transfer of medicines decision making from APCs to NTAG and the medicines committee and the ongoing role of APCs.

The working group explained that they had now met three times, there was support for the ICS wide formulary, however it would not be ready for January 2023 as may have been suggested, and that April 2023 was a more realistic timeframe. It was recommended that NTAG consider all new formulary applications from January 2023, with the current support of trust formulary pharmacists appraising the drug applications for their trusts.

The paper highlighted the cost of the new formulary platform, and there were discussions as to where this funding would come from, bearing consideration to the current licenses being funded. It was noted by the committee that resource would be required to support the expanded role of NTAG, again this needed to be considered alongside current resources provided from across the local APCs.

The committee were asked to accept the revised timeframe for the launch of the ICS wide formulary. The group accepted the suggested April 2023 date, but there was some concern raised as to the certainty that this would be achieved, and it was agreed that an update be returned to the February medicines committee meeting to provide assurance that as to this schedule.

It was accepted by the committee that NTAG will move to accept formulary applications from January 2023, but that it will need to be resourced if it is to do this, and that this should be from continuation of current support being brought together, and then a review of the resource required going forward.

The group were reminded that the terms of reference for Medicines Committee, whilst supported by the ICB executive, still await approval by the ICB board. Therefore at this time whilst Medicines Committee is noting the decisions of APCs and recommending the decisions of NTAG and its own committee, it is submitting all of these decisions/recommendations to the executive for approval post MC meeting.

It was recognised that formulary assessment and maintenance is only part of the work undertaken by APCs and that localities will need to look at the future roles of their APCs moving forward but noting that the formulary is not now scheduled to be lived before April 2023.

Action: Ian M to prepare a report regarding the implementation date for an ICB wide formulary, to aid conversations between Ewan, Ian and the APC Chairs and professional secretaries.

IM to return a progress and assurance report regarding the launch of the formulary in April to the February MC meeting

8) Shared care of medicines: Overview of current commissioning arrangements

RDTC presented a paper summarising the current shared care drug commissioning arrangements across the NENC, highlighting the variation that exists, and potential barriers within existing commissioning arrangements that may result in variation in access to these medicines across the NENC.

The committee recognised the differences described, in many instances these are a natural result of pre-ICB commissioning arrangements, and it was accepted that it would take time for new ICB wide arrangements to be introduced. It was emphasised that the difference in previous commissioning arrangements across NENC, did not necessarily mean that patients were not receiving medicines appropriately. In line with the aims of the national shared care protocols and guidance, the system would now work to ensure a more consistent approach to the sharing of care for medicines.

It was recommended that links be made with the primary care transformation team through the working group, and that EM continue to raise the request for a national specification for the commissioning of share care with the NHSE national medicines policy team.

Action: GM to feedback to the shared care working group and return a timeframe for the next phase of this project to the February meeting. EM to liaise with the national NHSE team as described.

9) Establishment of a NENC Medicines Safety Committee

Helena Gregory and EM presented to the committee a proposal for the formation of the medicines safety subgroup, that would sit jointly under the Quality & Safety and Medicines Committees, with joint senior sponsorship. The committee thanked HG for an excellent presentation and voiced their support for this proposal, discussion followed as to how the priorities of this group would be agreed. HG explained that an engagement session was being planned for February which would shape both the form and function of this group.

Action: HG to lead an engagement session in February to support the development of a medicines safety group for the NENC. Medicines Committee members were invited to share their thoughts with HG ahead of and during this session.

10) **Regional Medicines Optimisation Committee (RMOC)** – No meeting held

11) **NTAG minutes (Sept 22) and workplan (Nov 22)** – noted, shared with executive

12) **APC minutes (CD&T Sept 22, NoTGNC Oct 22, STS Dec 22)** – noted, shared with executive

13) **AOB**

Add Mary Bewley to the membership.

Date and time of next meeting: 21st February 2023 9-11am