

NENC Medicines Committee

Minutes of the meeting held on the 21st February 2022, 9-11am

Virtual meeting

Present:

Name	Position	Representing	September	October	December	February
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)	✓	✓	✓	✓
Sarrah Seldon (SS)	ICB Community Pharmacy Clinical Lead	NENC Community Pharmacy	✓	✓	✓	A
Tim Donaldson (TD) (or Chris Williams CW)	Mental Health Trust Chief Pharmacist	NENC Mental Health Trusts	✓ CW	✓ TD	✓ TD	✓ TD
Paul Fieldhouse (PF) (or other Acute Trust Chief Pharmacist)	North Cumbria Trust Chief Pharmacist	NENC Acute Trusts	✓	✓ DC	✓ PF	✓ PF
Rosie England (RE)	NEAS Chief Pharmacist	North East Ambulance Service	✓	✓	✓	A
Julia Young (JY) (or Louise Mason Lodge LML)	ICB Nursing Director	ICB Nursing directorate	✓ JY	✓ 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	✓	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	✓

1) Introductions and declarations of interest

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

It was noted that prescribing lead seats are being agreed, and will be reflected in the membership of this committee in due course.

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

The minutes were approved, and the committee updated on any outstanding issues, It was understood that some thorough and useful comments have been received in response to the consultation on the charter, with suggested next steps particularly around medicines safety. MM has requested a meeting with the medicines safety committee (in development) to discuss and agree before the charter returns to this committee.

3) Update from ICB executive meeting (Jan 23).

EM explained that ToR will be considered by the ICB Board in March

All previous submissions were approved by the executive

4) NTAG recommendations (Jan 23)

The committee supported these recommendations, which included NICE TAs, UTI guidance and updated to the CGM policy to the executive for approval.

The wider consultation process on implementation of TAs has started. Any inconsistencies in previous TAs are being worked through retrospectively as described by EM

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

The committee supported these decisions for submission to the executive for approval.

6) NENC Commissioning Recommendations for Medical Retinal Vascular Medicines.

The committee was asked to consider and decide on whether to replace the "Policy for the treatment of Wet Age-Related Macular Degeneration" agreed by the Northern CCGs in August 2017, in light of the publication by NHS England in August 2022 of the "Operational note: Commissioning recommendations following the national procurement for medical retinal vascular medicines".

Committee members stated that there was a need to understand why the savings alluded to in the 2017 policy had not been realised, and that this paper raised some important questions that should be considered by the executive. There followed significant discussions on why the previous policy may not have been successful, and also discussions around the limitations of the national operational note.

MC offered to invite the national lead to come and discuss the NHSE operational note with the four ICB chief pharmacists.

It was agreed that a more detailed paper was required for presentation to the executive.

AD (with CW) would undertake further communications with individual ophthalmology units across the ICB and include this information within a revised paper to be returned by email to this committee for consideration.

7) NENC formulary development - progress update

IM submitted an update paper to the committee as requested. A master list of agents had been agreed and GM was thanked for his help, NECs have begun populating the netformulary platform. In response to a question raised, it was confirmed that the RAG criteria had been agreed, but there was a further ask that green+ criteria be further reviewed as waiting lists are becoming a barrier to medicines access, JW and TD to discuss the use of "advice and guidance" as a future development. It was noted that it hadn't been specified whether this was an adult or paediatric formulary, and clarity was requested.

Formulary applications now considered by NTAG, and it was accepted that additional support/resource for NTAG prof sec would need to be considered. There are further discussions around the future role of APCs are ongoing, and will return to this meeting in due course.

8) NENC shared care of medicines workstream – progress update and approval of SCP template

The committee were updated on the progress of this work stream, and a new template was approved by the committee was ICB wide use.

MC provided the committee with an update on the national SCPs and explained that there were no timeframe for the necessary updates. It was understood that resource will be needed to keep the national SCPs up to date locally if this role is not undertaken nationally.

The committee requested further clarity around the criteria for shared care, and that SCPs state that they concern only “amber drugs”.

9) to 11)

PGD for the supply of nitrofurantoin for uncomplicated UTI by community pharmacists – extension of expiry date

ICB Authorisation of Well Up North Patient Group Directions (PGDs) used in their ICB commissioned services

ICB Authorisation of BPAS Patient Group Directions (PGDs)

The committee were requested to note for information only (rather than approval as per agenda) as the ICB has already approved these PGDs through alternative governance routes.

10) Lipid Optimisation in Secondary Prevention across ICB County Durham – Joint Working with Novartis Pharmaceuticals UK Ltd.

The committee noted that this arrangement must have previously been approved locally as it was already underway, and that it could not consider it as it was not ICB wide.

The committee requested a process be developed to prevent decisions such as these being taken locally rather than as an ICB.

11) AOB

Date and time of next meeting: 18th April 2023 9-11am