

Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on Wednesday, 8 November 2023 via MS Teams

MEMBERS:

Chris Lawson (Chair) Head of Medicines Optimisation (SY ICB, Barnsley)

Tom Bisset Community Pharmacist (Community Pharmacy South Yorkshire)

Patrick Cleary Lead Pharmacist - Barnsley BDU/Medicines Information

(SWYPFT)

Dr Mehrban Ghani Chair, Barnsley Healthcare Federation CIC, representing the

(from 23/211.1) Primary Care Networks (PCNs)

Dr Kapil Kapur Consultant Gastroenterologist (BHNFT)

Dr Jeroen Maters General Practitioner (LMC)
Dr Munsif Mufalil (from 23/211.1 General Practitioner (LMC)

to 23/219.2)

IN ATTENDANCE:

Nicola Brazier Administration Officer (SY ICB, Barnsley)
Deborah Cooke Lead Pharmacist (SY ICB, Barnsley)

Joanne Howlett Medicines Management Pharmacist (SY ICB, Barnsley)

Gillian Turrell Lead Pharmacist (BHNFT)

Tsz Hin Wong Senior Interface Pharmacist (BHNFT)

APOLOGIES:

Professor Adewale Adebajo Associate Medical Director (Medicines Optimisation) on behalf

of the Medical Director (BHNFT)

Dr Madhavi Guntamukkala Medical Director (SY ICB, Barnsley)

Dr Abdul Munzar General Practitioner (LMC)

ACTION BY

APC 23/208 QUORACY

The meeting was quorate.

APC 23/209 DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA

The Chair invited declarations of interest relevant to the meeting agenda. The Head of Medicines Optimisation declared that she currently signs a variety of rebate agreements on behalf of the South Yorkshire ICB (Barnsley), none of which were applicable to today's agenda, noting that there is no personal financial gain and all savings from rebate schemes are re-invested into other local health services. The rebates are all in line with the recommended PrescQIPP guidance and the full list is available on the website. There were no further declarations of interest to note.

APC 23/210 DRAFT MINUTES OF THE MEETING HELD ON 11th OCTOBER 2023

APC 23/187 - Barnsley Emollient Formulary Choices Guidance It was agreed to include a post meeting note that a further minor amendment has been made to include Zerobase® as an alternative cream for existing patients.

NB

23/198.2.4 - Dekas Plus Liquid (vitamin for CF patients)

A typo to be corrected ..." under the age of 3 ..."

NB

CL

APC 23/186 - Heart Failure Pathway

The Chair to extend thanks and appreciation to the BEST website GP Lead for producing the pathway.

Subject to the above amendments, the minutes were accepted as an accurate record of the meeting.

The Head of Medicines Optimisation thanked the Community Pharmacist for Chairing the October 2023 meeting on her behalf.

APC 23/211 MATTERS ARISING AND APC ACTION PLAN

23/211.1 <u>Freestyle Libre 2 Sensor</u>

The Head of Medicines Optimisation had raised with the SY HOMM the concerns highlighted at the last meeting regarding the issues reported by many patients with the product. The other areas appear to give information to patients about the route to go back to the company and, they have a hard line around issuing any more sensors to patients. It was agreed to obtain a copy of the information given to patients.

The Lead Pharmacist (SYICB, Barnsley) advised that the Barnsley Freestyle Libre guidance is in the process of being updated, suggesting that this information could be incorporated into the guidance. Information will also be included in the APC memo.

The Community Pharmacist advised that the quantity of sensors prescribed by nurses is 5 compared to 2 being prescribed by GPs.

The Head of Medicines Optimisation noted that given the large number of type 2 patients being started on Freestyle Libre 2, there needed to be consistency with the information/counselling given to all and that should patients have any queries they know who to come back to.

It was agreed that information sent out to patients from other areas would be brought back to the next meeting so that guidance can then be issued to Barnsley GP practices.

Agreed action: -

Information to be brought back to the next meeting.

DC

23/211.2 <u>Metolazone for Oedema Amber-G guideline (update)</u>

The Lead Pharmacist, BHNFT to take this to the MDT.

GT

GT

23/211.3 <u>NICE HST (September 2023)</u>

The Lead Pharmacist, BHNFT **to advise** if the following NICE HST is applicable for use at BHNFT: -

HST28 Birch bark extract for treating epidermolysis bullosa

Action Plan - other

23/211.4 <u>Ikervis® (ciclosporin eye drop) amber G guidance</u>

The guidance was awaiting feedback from the specialists. The Lead Pharmacist, BHNFT would assist again with obtaining specialist feedback. This was deferred to January 2024.

GT

23/211.5 <u>BHNFT D1 issues</u>

The Head of Medicines Optimisation confirmed that the paper regarding governance around the MMT access to the hospital IT systems has been drafted, awaiting confirmation regarding access being given to SWYPFT pharmacists.

The Lead Pharmacist, BHNFT agreed to facilitate arrangement of a meeting with Richard Billam and colleagues from the MMT and SWYPFT to resolve any system access issues.

The cancellation of the D1 Issues Group meetings was discussed, noting that the group last met in February 2023, with the next meeting scheduled for January 2024. The Head of Medicines Optimisation advised that she would be writing to the Medical Director and the Associate Medical Director regarding the cancellation of these meetings throughout the year.

Agreed actions: -

- The Lead Pharmacist, BHNFT to arrange a meeting with Richard Billam and colleagues to resolve any system access issues.
- GT
- The Head of Medicines Optimisation to write to the Medical Director and the Associate Medical Director regarding the cancellation of the D1 Issues Group meetings.

CL

23/211.6 Ticagrelor Audit

This was deferred to April 2024.

23/211.7 <u>FreeStyle Libre Guidance</u>

The Lead Pharmacist (SYICB, Barnsley) advised that the Freestyle Libre guidance has been updated in line with the new NICE guidance recommending it for a wider cohort of patients and the updated guidance is due to be brought to a future meeting for ratification. However, issues with capacity have been flagged by the service who are therefore not fully endorsing the updated guidance. How we manage the introduction of these patients therefore needs to be considered.

The Head of Medicines Optimisation advised that all areas across South Yorkshire are in the same position with regards to secondary care initiation, noting it was felt very strongly that patients needed to be initiated by specialists. It was recognised that a plan to work through the backlog was required but this will be worked through by the central group and our guidance shouldn't be any different to other areas with regards to initiation.

The Lead Pharmacist (SYICB, Barnsley) would feed this back to the Clinical Pharmacist updating the guidance, acknowledging that we've consulted with the service and the service have given us the points of issue, however advising that the guidance needs to be progressed,

DC

and the service capacity issues will need to be worked through separately to the guidance.

23/211.8 Oxygen Incidents

The Head of Medicines Optimisation has tried to obtain feedback from those involved at BHNFT around the oxygen incidents reported and will continue to chase to bring an update to the next meeting.

CL

23/211.9 Inclisiran Amber Guideline (new)

The Lead Pharmacist, BHNFT confirmed that patients are now being started on inclisiran through the specialist clinics, noting that by giving the first 2 doses in clinic, the first patients would not present to primary care until July 2024. It was however acknowledged that the guidance was required to be in place as soon as possible for any primary care clinicians who may have a special interest and may wish to prescribe should it be within their scope of practice.

The Lead Pharmacist, BHNFT would aim to take the draft guideline to the December 2023 LMC and APC meetings.

GT

23/211.10

Prescribing Oscillating Positive Expiratory Pressure (OPEP) Devices At the April 2023 meeting, the Committee endorsed the Sheffield guidance presented but agreed the need to work through the detail to ensure a supporting local pathway was in place with information about engagement with the service; who might benefit from the devices; how patients would be referred to the service; and how they would move along the pathway. This work was deferred awaiting BDU Lead Pharmacist replacement.

The Lead Pharmacist, SWYPFT has discussed this with the physiotherapist at the BREATHE team and understands that there would be a competence framework developed where the BREATHE nurses would then prescribe these products for those suitable.

It was agreed that the Sheffield guidance would be shared with the Lead Pharmacist, SWYPFT to consider incorporating the Barnsley pathway information rather than having a separate pathway document. The Lead Pharmacist, SWYPFT to arrange a meeting with the BREATHE team to progress this as requests to prescribe are being sent to GP practices from the BREATHE team.

Agreed action: -

 The Lead Pharmacist, SWYPFT to arrange a meeting with the BREATHE team to progress.

PC

23/211.11

Action Plan Target Dates Dalteparin Shared Care Guidance

The Lead Pharmacist, BHNFT to advise regarding a deferred date.

GΤ

Combination anticoagulant and antiplatelet treatment for patients with concomitant AF and ACS Guideline

The Lead Pharmacist, BHNFT to advise regarding a deferred date.

Hyperkalaemia Management Guideline

Deferred to January 2024.

NB

GT

Immunosuppressants - dermatology guidelines

The Lead Pharmacist, BHNFT advised that she would seek assistance from the operational management team for dermatology as she is struggling to get engagement with the specialists to progress this. Timeframe to be advised.

GT

Melatonin

The GP (MM) referred to discussions at an LMC meeting regarding a melatonin action for the APC action plan. The Head of Medicines Optimisation agreed to follow this up to clarify the action.

CL

APC 23/212 DYSPEPSIA PATHWAY (NEW)

The Medicines Management Pharmacist presented the pathway developed by the BEST website GP Lead, adapted from the British Society of Gastroenterology Guidelines on the Management of Functional Dyspepsia which was produced in September 2022, and the NICE Dyspepsia guidelines.

The LMC approved the pathway, and the receipt of positive comments from Dr Atkinson was noted. The GP (MM) asked that the title be changed to Un-investigated Dyspepsia.

The pathway was to be presented at the November 2023 BEST meeting, although the Consultant Gastroenterologist (BHNFT) felt there would be limited time to cover the topic in-depth.

The Consultant Gastroenterologist (BHNFT) spoke about the complexities with managing dyspepsia, dedicated time to spend talking to the patients, and having some kind of access to psychological therapies, noting historic issues with getting help and support from psychological therapies due to funding or other issues.

The Chair, Barnsley Healthcare Federation CIC, representing the Primary Care Networks (PCNs) asked that information presented at the BEST meeting prioritises what is relevant to GPs.

Linked to discussions around IBD management and new inhibitors, the Head of Medicines Optimisation offered to find out from commissioning colleagues if anyone was leading on any DMI work that we can link into around pathways to give clinicians more time, given the advances that we have got and that are coming through that can benefit patients, and primary and secondary care clinicians. It was recognised that there wasn't enough time in primary care, and it is very important that we manage these patients appropriately and give them the time that they need.

Agreed action: -

 The Head of Medicines Optimisation to check with commissioning colleagues regarding DMI work. CL

APC 23/213 ADVICE REGARDING RILUZOLE SUPPLIES IN THE COMMUNITY (FOR INFORMATION)

The Lead Pharmacist, (SY ICB, Barnsley) presented the advice regarding riluzole supplies in the community, for information. This was also raised at the November 2023 IMOC meeting.

The information has been produced by a colleague in Sheffield highlighting that there is an issue with the supply of generic riluzole. There are, however, supplies of the branded product Rilutek® which is available at a comparatively high price. It was noted that the prescribing in Barnsley is currently by brand.

This information has been shared with MMT members should they receive any queries from GP practices.

APC 23/214 MEDICINE SUPPLY NOTIFICATION (MSN) FOR LAMOTRIGINE 5MG DISPERSIBLE TABLETS (FOR INFORMATION)

The Lead Pharmacist (SY ICB, Barnsley) presented the advice, for information, noting a small amount of prescribing across 8 Barnsley GP practices (9 patients in total). Information has been shared with MMT members and the practices that have prescribed it have been highlighted so that the team can support practices accordingly.

APC 23/215 SHARED CARE GUIDELINES/AMBER G SHARED CARE GUIDELINES

23/215.1 <u>Goserelin 3.6mg implant (Zoladex®) Amber-G guideline</u>
The Medicines Management Pharmacist (SY ICB, Barnsley)
presented the guideline, which has undergone a routine update in line with the current BNF and SPC, with changes tracked.

Following feedback from the GP (MM), the following changes in liaison with the specialist have been made: -

- The specialist should specify the length of treatment with Zoladex® 3.6mg implant.
- Since androgen deprivation treatment may prolong the QT interval, the specialist should consider carrying out a baseline ECG prior to the initiation of Zoladex®. The specialist should also consider repeating the ECG post initiation of Zoladex® (added to monitoring section).
- The specialist should assess the risk of osteoporosis (goserelin may cause reduction in bone mineral density). The specialist will request the baseline DEXA scan where required. Once the patient is discharged, the primary care clinician should request any further DEXA scans if recommended after the baseline scan (added to monitoring section).
- Patients with known depression and patients with hypertension should be monitored carefully, adding to the monitoring section: In the case of patients with known depression, the patient should be counselled by the initiating specialist, and this should be documented in the patient's notes, and that blood pressure should be measured before initiation of Zoladex® and if the patient is found to have hypertension, the primary care clinician should be advised in writing so that the patient can be managed appropriately (added to the monitoring section).

The Committee approved the updated Goserelin 3.6mg implant (Zoladex®) Amber-G guideline.

APC 23/216 FORMULARY REVIEWS

23/216.1

Formulary Review Plan

There were no changes to note.

The Lead Pharmacist (SYICB, Barnsley) advised that the current focus of work is related to the IMOC Subgroup and reviewing of the standardised traffic light classifications across South Yorkshire, therefore review of the formulary review sections is currently on hold until this review work has been undertaken.

APC 23/217 NEW PRODUCT APPLICATION LOG

There were no changes to note.

APC 23/218 REGIONAL MEDICINES OPTIMISATION COMMITTEE (RMOC) & SOUTH YORKSHIRE INTEGRATED MEDICINES OPTIMISATION COMMITTEE (SY IMOC)

23/218.1 SYICB IMOC Ratified Minutes, 6th September 2023

The minutes were shared for information.

23/218.2 SYICB IMOC Draft Minutes, 4th October 2023

The minutes were shared for information.

23/218.3 <u>SYICB IMOC Verbal Key Points – 1st November 2023</u>

23/218.3.1 PCSK9

A significant discussion took place, noting that the IMOC have decided to take a list of all the issues raised by primary care colleagues and work through them. This would be brought back to the IMOC meeting.

23/218.3.2 CGM Guidance

A progress update was given at the IMOC meeting and it was noted that numerous CGM meetings have been arranged to progress this work (Sheffield are leading on this).

23/218.3.3 Traffic Light Classifications

There were discussions regarding traffic light classifications and the list of products that were considered would be brought to the next APC meeting.

The Head of Medicines Optimisation advised that Barnsley have taken a very supportive approach to try and negotiate our way through all of this on behalf of all the clinicians across all the providers. It was felt that resources and individuals have been taken from Place to progress work, when other areas don't engage in the same way, therefore slowing progress for us in Barnsley.

APC 23/219 BARNSLEY APC REPORTING

23/219.1 APC Reporting September 2023

The Lead Pharmacist, (SY ICB, Barnsley) presented the enclosure showing reports received directly into the APC reporting mailbox. There were 31 APC reports received for the month of September 2023.

23/219.2 APC Reporting September 2023 Key Themes

The summary report was presented, showing 62 reports in total, including 31 received directly into the APC reporting mailbox and 31 interface queries received directly to the BHNFT pharmacy team for the month of September 2023.

From the category breakdown, the majority of reports related to D1 communication issues.

Details relating to some of the significant issues from APC reports were shared and highlighted. These included D1 communication/ other discharge related issues including receipt of D1s, duplication of D1s and medication changes/information unclear or missing from D1s; formulary related and other issues, including feedback that patients are struggling with Tiogiva® blisters. The company have been contacted in relation to this and have advised that they haven't received other reports of this issue but have shared a video which has been shared with the pharmacy that reported the issue.

The Head of Medicines Optimisation thanked the Lead Pharmacist for how thoroughly this work is prepared, summarised, and presented in a clear format.

The Community Pharmacist agreed with the Tiogiva® packaging issues reported and shared what support he provides to patients when issuing Tiogiva®. It was suggested that information be shared with all community pharmacies advising how they can explain how to use this to patients (new medicines service follow up advice).

The Community Pharmacist asked if an additional category should be added to PharmOutcomes for pharmacists to report error reports from virtual wards. The Lead Pharmacist (SYICB, Barnsley) to look at the numbers of reports received in relation to virtual wards and if there are significant numbers, an additional category can be added.

The Senior Interface Pharmacist (BHNFT) spoke about the information provided in the TTO section and medication changes section, noting that the TTO section information is pulled from EPMA, and the medication changes section is free typed. The recurring problem with inaccurate/missing information on D1s was discussed, suggesting that training new doctors about prescribing and D1s would benefit from being addressed centrally and done at scale to find a solution.

Agreed actions: -

- The Lead Pharmacist (SYICB, Barnsley) to check number of reports received regarding virtual wards.
- The Lead Pharmacist (SYICB, Barnsley) to include some information in the MMT newsletter to flag the Tiogiva® packaging issue and new medicines service follow up advice.

23/219.3 <u>APC Reporting September 2023 Interface Issues</u> The enclosure detailing the interface queries received directly within

The enclosure detailing the interface queries received directly within BHNFT pharmacy team was received and noted.

APC 23/220 NEW NICE TECHNOLOGY APPRAISALS

23/220.1 <u>NICE TAs October 2023</u>

The Lead Pharmacist, BHNFT advised that the following NICE TAS were applicable for use at BHNFT:-

- TA274 (Update) Ranibizumab for treating diabetic macular oedema
- TA916 Bimekizumab for treating active psoriatic arthritis

DC

DC

- TA917 Daratumumab with lenalidomide and dexamethasone for untreated multiple myeloma when a stem cell transplant is unsuitable
- TA918 Bimekizumab for treating axial spondyloarthritis
- TA920 Tofacitinib for treating active ankylosing spondylitis
- TA921 Ruxolitinib for treating polycythaemia vera
- TA925 Mirikizumab for treating moderately to severely active ulcerative colitis

The Lead Pharmacist, BHNFT advised that the following NICE TAS were not applicable for use at BHNFT:-

- TA923 Tabelecleucel for treating post-transplant lymphoproliferative disorder caused by the Epstein-Barr virus (terminated appraisal)
- TA926 Baricitinib for treating severe alopecia areata (not recommended)

The Lead Pharmacist, BHNFT **to advise** if the following NICE TAs are applicable for use at BHNFT:-

- TA915 Pegunigalsidase alfa for treating Fabry disease
- TA919 Rimegepant for treating migraine (IMOC decision TBC)
- TA924 Tirzepatide for treating type 2 diabetes
- TA927 Glofitamab for treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic treatments

The Lead Pharmacist (SY ICB, Barnsley) to advise the IMOC decision on: -

TA922 Daridorexant for treating long-term insomnia

A green traffic light classification for NICE TA922 may be considered in the future but pathways need to be in place first, therefore IMOC agreed that I further discussions would take place prior to assigning the classification.

- 23/220.2 <u>Feedback from BHNFT Clinical Guidelines and Policy Group</u>
 There was nothing relevant to report.
- 23/220.3 <u>Feedback from SWYPFT NICE Group</u>
 There was nothing relevant to report but a discussion around the current talking therapies provided was noted.

APC 23/221 FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS 23/221.1 Primary Care Quality & Cost-Effective Prescribing Group (QCEPG) There was nothing relevant to report.

- 23/221.2 <u>BHNFT</u> There was nothing relevant to report.
- 23/221.3 SWYPFT Drug and Therapeutics Committee
 The Lead Pharmacist, SWYPFT advised that they were looking to implement that District Nurses would always carry adrenaline and that BHNFT would be informed when this is finalised so that adrenaline would not be required to be supplied when BHNFT issue IV antibiotics.

GT

DC

Page 9 of 13

The Greenlight Alerts (Liquid Medicines and Medicines that increase risk of suicidal ideation) circulated as additional papers were noted and it was agreed that these should be circulated with the APC memo.

Agreed action: -

• The Greenlight Alerts to be circulated with the APC memo.

DC

23/221.4 Community Pharmacy Feedback

23/221.4.1 <u>Independent Prescriber Pathfinder Project</u>

This is expected to start in January 2024, with 10 community pharmacies involved across South Yorkshire, including 2 in Barnsley.

23/221.4.2 Access Recovery Plan

As part of the Access Recovery Plan and the national services around 7 common conditions, negotiations are now complete, and the start date is to be confirmed soon.

23/221.5 Wound Care Advisory Group

There was nothing relevant to report.

APC 23/222 ISSUES FOR ESCALATION TO THE BARNSLEY PLACE QUALITY & SAFETY COMMITTEE (16th NOVEMBER 2023)

The standing updates on IMOC and APC Reporting/D1 issues would be escalated to the Barnsley Place Quality and Safety Committee.

CL

APC 23/223 FORMULARY ACTIONS

23/223.1 <u>SPS New Medicines Newsletter September 2023</u> Received for information.

23/223.2 IMOC Horizon Scanning November 2023

The Medicines Management Pharmacist presented enclosure L detailing the traffic light classifications agreed at the November 2023 IMOC meeting. The formulary changes for Barnsley were highlighted as follows: -

- Andusomeran (Spikevax XBB.1.5) (new medicine) formulary green (one entry on green traffic light list for COVID-19 vaccine with the wording: In line with national recommendations and refer to the Green Book)
- Raxtozinameran Comirnaty® Omicron XBB.1.5 [30 micrograms/dose] (new medicine) formulary green (one entry on green traffic light list for COVID-19 vaccine with the wording: In line with national recommendations and refer to the Green Book)
- Raxtozinameran Comirnaty® Omicron XBB.1.5 [10 micrograms/dose] (new medicine) - formulary green (one entry on green traffic light list for COVID-19 vaccine with the wording: In line with national recommendations and refer to the Green Book)
- Raxtozinameran Comirnaty® Omicron XBB.1.5 [3
 micrograms/dose] (new medicine) formulary green (one entry
 on green traffic light list for COVID-19 vaccine with the
 wording: In line with national recommendations and refer to the
 Green Book)

- Daridorexant (new medicine) no classification agreed until the pathway is available (currently non-formulary grey)
- Birch bark extract (new medicine) already red (classified at October 2023 IMOC)
- Cipaglucosidase alfa (new medicine) already red (classified at September 2023 IMOC)
- Mavacamten (new medicine) already red (classified at October 2023 IMOC)

The Committee approved the formulary changes.

The Medicines Management Pharmacist referred to the SY ICB IMOC Draft Minutes, 4th October 2023, highlighting Barnsley formulary classifications in line with the IMOC classification: -

- Dekas plus liquid (non-Cystic fibrosis patients) non-formulary grey
- Dekas plus liquid (children under 3 years with Cystic fibrosis) formulary green
- Varicella (chickenpox) vaccine (Varilrix®, Varivax®) formulary red for use prior to immunosuppression, in adults and children without immunity

The Committee approved the formulary recommendations.

APC 23/224 MHRA DRUG SAFETY UPDATE (OCTOBER 2023)

The update was noted with the following information highlighted relevant to primary care: -

MedSafetyWeek November 2023: your Yellow Card report helps to improve patient safety

The eighth annual #MedSafetyWeek social media campaign will take place from 6 to 12 November 2023. It will focus on the importance of reporting suspected adverse reactions to medicines and suspected problems with medical devices. We ask healthcare professionals to support the campaign and talk to their patients and colleagues about side effects and how to report suspected problems to the Yellow Card scheme.

APC 23/225 SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES (FOR INFORMATION)

The minutes from NHS South Yorkshire ICB Sheffield (21st September 2023) and Doncaster & Bassetlaw APC (28th September 2023) were received and noted.

APC 23/226 ANY OTHER BUSINESS

23/226.1 H2-Receptor Antagonist - Famotidine

The Lead Pharmacist, BHNFT advised that the Trust had flagged that famotidine is still listed as non-formulary, and due to the withdrawal of ranitidine and the multiple drug interaction associated with cimetidine, there was a request to reclassify famotidine from non-formulary to formulary green.

It was agreed that a briefing paper reviewing the formulary section would be brought to the next APC meeting for consideration by the Committee.

Agreed action: -

 It was agreed that a briefing paper reviewing the formulary section would be brought to the next APC meeting. GΤ

23/226.2 Barnsley Care Home Influenza Outbreak SOP

The Lead Pharmacist (SYICB, Barnsley) referred to the Barnsley Care Home Influenza Outbreak Protocol that was presented at the July 2023 APC meeting, with some supporting antiviral information. The supporting antiviral information was endorsed by the Committee; however, the outbreak protocol was being produced by BMBC colleagues in consultation with key stakeholders. This has now been approved by the Health Protect Board and the protocol would be uploaded to BEST with a link included in the APC memo.

23/226.3 COVID Medication Service

The Community Pharmacist referred to the change in medication supply provider/route that was changing from 20th November 2023, asking if this has been added to the risk register. The Head of Medicines Optimisation advised that this would be added to the ICB risk register.

CL

The Head of Medicines Optimisation advised that work was being progressed with the new provider to ensure that they go live from 21st November, noting that information about changes to referral telephone numbers/email addresses would be sent out to primary care. The Head of Medicines Optimisation has made the recommendation regarding going through 'Choose and Book'.

23/226.4 Wegovy® Pilot

The Chair, Barnsley Healthcare Federation CIC, representing the Primary Care Networks (PCNs) advised of a successful bid for funding for an ICB national pilot.

The bid was for Wegovy® to be used over the next 3-4 years, alliance work with Barnsley PCN and the Tier 3 Weight Management Service at SWYPFT. There will be 10 practices providing the patients, approximately 1,000 patients to be enrolled over the 3-4 years, staying on the drug for a 2 year period. The wrap around service will be provided by the Tier 3 Weight Management Service, employing additional dietitians to do this. It is understood that the supplies will come from a different route, therefore no supply issues were expected. The pilot was expected to start early 2024. More information would be shared with the Committee when available.

Following discussion regarding linking with the wider weight management services for awareness of the pilot, the Chair, Barnsley Healthcare Federation CIC, representing the Primary Care Networks (PCNs) would ask Janie Wike to confirm what conversations have taken place with the wider weight management services.

Agreed actions: -

- More information would be shared with the Committee when available.
- Janie Wike to confirm what conversations have taken place with the wider weight management services.

MG

MG

APC 23/227 DATE AND TIME OF THE NEXT MEETING

The time and date of the next meeting was confirmed as Wednesday, 13th December 2023 at 12.30 pm via MS Teams.

