

**Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on  
Wednesday, 8<sup>th</sup> January 2025 via MS Teams**

**MEMBERS:**

Erica Carmody (Chair)	Medicines Optimisation Senior Pharmacist, Strategy & Delivery Barnsley & Doncaster (SY ICB)
Professor Adewale Adebajo	Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT)
Dr Kapil Kapur	Consultant Gastroenterologist (BHNFT)
Chris Lawson	Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB)
Dr Munsif Mufalil (from 25/04.3.5)	General Practitioner (LMC)

**IN ATTENDANCE:**

Nicola Brazier	Medicines Optimisation Business Support Officer (SY ICB)
Joanne Howlett	Medicines Optimisation Lead Pharmacist, Strategy and Delivery Barnsley (SY ICB)
Tsz Hin Wong	Senior Interface Pharmacist (BHNFT)

**APOLOGIES:**

Patrick Cleary	Lead Pharmacist - Barnsley BDU/Medicines Information (SWYPFT)
Deborah Cooke	Senior Pharmacist, Strategy and Delivery, Barnsley & Clinical Effectiveness (SY ICB)
Gillian Turrell	Lead Pharmacist (BHNFT)

		<b>ACTION BY</b>
<b>APC 25/01</b>	<b>QUORACY</b> The meeting was not quorate therefore any proposed decisions/ approvals will be ratified for endorsement either outside of the meeting by email or at the next meeting.  As previously informed, the Committee were advised that the chairperson role for future APC meetings would be shared between the Programme Director for MO, Strategy and Delivery (SY ICB) and the MO Senior Pharmacist (EC).	<b>JH/NB</b>
<b>APC 25/02</b>	<b>DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA</b> There were no declarations of interest relevant to the agenda to note.  The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) would check if rebate agreements historically signed on behalf of the ICB still needed to be declared or if these had now expired.	<b>CL</b>
<b>APC 25/03</b>	<b>DRAFT MINUTES OF THE MEETING HELD ON 11<sup>th</sup> DECEMBER 2024</b> The minutes were approved as an accurate record of the meeting.	

**Agreed action: -**

- As the meeting was not quorate, approval will be obtained outside the meeting by email.

**NB**

**Post meeting note:** *approval received by email; therefore, the minutes were approved by the Committee.*

**APC 25/04**  
25/04.1

**MATTERS ARISING AND APC ACTION PLAN**

NICE TAs (October and November 2024)

In the absence of the Lead Pharmacist, BHNFT, the applicability of NICE TA1010 (October 2024) and NICE TA1012 (November) for use at BHNFT would be deferred and advised at the next meeting.

**GT**

It was agreed that the Senior Interface Pharmacist (BHNFT) to advise the Lead Pharmacist, BHNFT that any barriers to obtaining decisions on the applicability of NICE TAs for use at BHNFT should be escalated to the Associate Medical Director, BHNFT to assist with obtaining confirmed decisions for any outstanding decisions and provisional decisions given.

**Agreed action:**

- The Senior Interface Pharmacist (BHNFT) to advise the Lead Pharmacist, BHNFT that any barriers to getting decisions on the applicability of NICE TAs for use in BHNFT should be escalated to the Associate Medical Director.

**TW**

25/04.2

Shortage of Sytron Liquid

The MO Pharmacist, SY ICB advised that, as mentioned at the last meeting, there is a shortage of sytron liquid. This is currently out of stock with an anticipated resupply date of October 2025. BHNFT are using an alternative brand of sodium ferredetate 27.5mg/5ml oral solution sugar free (SodiFer) instead of Sytron® for all patients usually given Sytron®, including premature babies, noting that SodiFer is not a medicinal product but is classified as a food supplement.

As an interim measure, a link to the SPS out of stock information will be added to the formulary, and a note to say that BHNFT are using SodiFer. We will look to provide additional information to add to the formulary and this will be brought back to a future APC meeting.

**Agreed action: -**

- Additional information to be added to the formulary would be brought back to a future APC meeting.

**JH**

25/04.3  
25/04.3.1

Action Plan – other  
BHNFT D1 Issues

The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) advised that a meeting is planned with the Chief Pharmacist, BHNFT in January 2025 where D1 issues will be one of the areas to be discussed.

25/04.3.2

GP Collective Action and Shared Care

The Associate Medical Director, BHNFT asked for an update on the GP collective action in relation to working to contract and the impact on shared care, being sighted on what Barnsley GPs have advised

and the notice they have given but wanted to get an understanding of the situation and position of GPs across the ICB footprint with GPs working to contract.

The Programme Director for Medicines Optimisation, Strategy and Delivery, SY ICB, advised that the position was the same across South Yorkshire, that discussions were ongoing with the LMCs, and that the shared care commissioning arrangements were being reviewed across South Yorkshire, looking at differences in payments and appropriate reimbursement, recognising that GP practices accepting shared care requests is optional, even if commissioning arrangements are in place.

It was acknowledged that Barnsley GPs are not currently accepting 'new' shared care requests, and that a greater amount of action was expected in January, noting that intelligence is being collated about any issues arising, to resolve issues through the review of the shared care commissioning arrangements. As not directly involved in this review, the Programme Director for Medicines Optimisation, Strategy and Delivery, SY ICB agreed to find out what the timeline was for this work.

**Agreed action: -**

- The Programme Director for Medicines Optimisation, Strategy and Delivery, SY ICB to seek information re timeline was for the review of the shared care commissioning arrangements.

**CL**

25/04.3.3 Shared Care Protocol for the Prescribing of Oral Antipsychotics in Adults – Annual ECG

This is being updated and the target date will be reviewed with the Lead Pharmacist, SWYPFT.

**NB**

25/04.3.4 Update Optimising Lipid Management for Secondary Prevention of Cardiovascular Disease in Barnsley  
Discussed at 25/08.2.

25/04.3.5 Nebuliser guidance

In February 2020, Dr Longshaw, Consultant Physician attended the APC to present the draft nebuliser policy/guidance document, and it was agreed that Dr Longshaw would work with one the MMT Clinical Pharmacists to review patients at a GP practice undertaking a trial MDT. They would look to develop criteria/guidance to support the primary care review of existing patients moving forward, identifying which groups of patients should be referred to the BREATHE service.

Due to work capacity issues and staff changes delaying the progress of this, it was suggested that picking up nebule review work across South Yorkshire, and not just specific to Barnsley, would be discussed with Deborah Leese, the new lead for respiratory within the Medicines Optimisation Team.

It was agreed to remove the nebuliser guidance action on the action plan and open a new action for the Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) to discuss taking forward nebuliser review work with Deborah Leese, SY MO Respiratory Clinical Lead.

**Agreed action: -**

- The nebuliser guidance action would be closed on the action plan and a new action added for the Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) to discuss nebuliser review work with Deborah Leese, SY MO Respiratory Clinical Lead.

**CL**

25/04.3.6

**Target Dates**

Members to check upcoming actions and advise if any target dates need revising.

**ALL**

25/04.3.7

**Proposed APC Feedback to IMOC**

The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) noted awareness of discussions taking place outside of the APC, therefore wanted to check if APC feedback to IMOC was still required if the issues have been resolved.

The LMC GP (MM) asked that the action remain on the action plan as a meeting between Barnsley LMC representatives and the IMOC was yet to be arranged. Barnsley LMC are not attending the IMOC meetings but are giving feedback where they can give feedback, but a resolution hasn't moved forward yet in the direction they would like.

This would be discussed at the next meeting.

**APC 25/05**

**SHARED CARE GUIDELINES/AMBER G SHARED CARE GUIDELINES**

25/05.1

**Amber Shared Care Guideline for the use of anticonvulsants as mood stabilisers (update)**

The MO Lead Pharmacist, SY ICB presented the updated guidance which has been updated by the Lead Pharmacist, SWYPFT. The IMOC approved wording regarding the MHRA valproate alerts has been incorporated into the guideline but the Lead Pharmacist, SWYPFT and the LMC GP (MM) have been discussing carbamazepine monitoring, and the decision on whether to use annual bloods or to base the monitoring on the South Yorkshire Epilepsy guidelines and Sheffield bipolar guidelines (as is currently in the draft guideline), noting this was to be taken to the LMC for discussion. The LMC GP (MM) advised that he and the Lead Pharmacist, SWYPFT had agreed to include annual bloods.

Subject to the wording being amended in line with what has been agreed around carbamazepine monitoring and annual bloods, the Committee approved the guideline. The final updated guideline would be shared with the LMC GP (MM) for approval. The LMC would then be informed of the decision made, on approval by the LMC GP (MM).

**Agreed actions: -**

- The MO Lead Pharmacist, SY ICB to check with the Lead Pharmacist, SWYPFT regarding updating the wording around carbamazepine monitoring and annual bloods.
- The final updated guideline to be shared with the LMC GP (MM) for approval.

**JH**

**JH**

***Post meeting note: the updated guideline has been approved by the Lead Pharmacist, SWYPFT, awaiting approval by the LMC GP (MM).***

25/05.2

SY ICB Shared Care Protocol for Lithium for adults within mental health services in Sheffield and Barnsley (update)

The MO Lead Pharmacist, SY ICB presented the updated final draft of the lithium shared care guideline, a combined Barnsley and Sheffield guideline. The guideline is based on the NHS England template and will replace the current Barnsley guideline. The guideline has been to Sheffield APG for approval and has had input from The Lead Pharmacist and Advanced Clinical Pharmacist, SWYPFT. Barnsley LMC have seen previous drafts of the guideline and have made comments, but we were awaiting final comment/approval from the LMC.

It was noted that Doncaster and Rotherham lithium clinics monitor patients therefore have different arrangements in place to Barnsley and Sheffield.

Subject to approval from the LMC, the SY ICB Shared Care Protocol for Lithium for adults within mental health services in Sheffield and Barnsley was approved by the Committee.

**Agreed action: -**

- The LMC GP (MM) to check the updated guideline and respond/approve by email.

**MM**

25/05.3

Inclisiran SCG

The LMC GP (MM) raised that as part of the GP collective action, and as per GPC and BMA guidance, practices are within their rights to refuse to accept inclisiran transfers of care from secondary care, noting that this is a national position. If appropriately funded and appropriate training is given, there is a possibility that practices may accept transfer of care from secondary care, but it is their decision. GP practices have contacted the LMC for advice and this is the advice that's been given. The MO Senior Pharmacist (EC) is working with Dr Bannon around the funding issue. The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) advised that she did raise this at the LMC meeting and LMC representatives advised that this could be resolved if the funding and training was appropriate.

As discussed at 25/04.3.1, the Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) was checking the timeline for reviewing the shared care commissioning arrangements, noting awareness that information has been asked for and collated, and that there would need to be a proposal developed from the review undertaken, and taken back to the LMCs.

**APC 25/06**

**FORMULARY**

Update on hyperlink issue (hyperlinks to guidelines on the BEST website)

The MO Lead Pharmacist, SY ICB advised that most of the hyperlinks on the formulary to BEST have now been fixed. There are a few remaining which are being looked at. Any issues identified with links to BEST that are not working on either the formulary or ScriptSwitch should be reported to the MO Lead Pharmacist and/or the Senior Pharmacist, SY ICB so that these can be fixed.

## **APC 25/07      NEW PRODUCT APPLICATION LOG**

The new product application log was received for information.

It was noted that the new product applications for wound care dressings are being worked through with the wound care group to ensure the applications are complete and correct, and these will be brought back to the Committee for consideration.

A new product application has been received for a suncream. The proposal is to take this application to the IMOC subgroup to assign a general classification, then progress any further work required to be undertaken before the application is brought back to the Committee for consideration.

## **APC 25/08      REGIONAL MEDICINES OPTIMISATION COMMITTEE (RMOC) & SOUTH YORKSHIRE INTEGRATED MEDICINES OPTIMISATION COMMITTEE (SY IMOC)**

### **25/08.1      SYICB IMOC Draft Minutes – 4<sup>th</sup> December 2024**

The minutes were received for information.

### **25/08.2      IMOC approved guidelines (for information)**

Links to the following guidelines, approved by IMOC were shared with the agenda for information: -

- South Yorkshire Summary of National Guidance for Lipid Optimisation in Primary and Secondary Prevention of CVD
- SY ICS Medicines Adherence Support Pre-assessment & review form (for use, should practitioners wish to, before referral to a pharmacy)

### **South Yorkshire Summary of National Guidance for Lipid Optimisation in Primary and Secondary Prevention of CVD**

The MO Lead Pharmacist, SY ICB noted that as discussed at the last APC meeting, we understand that the intention is to have the South Yorkshire guidance in place of the Barnsley guidance, therefore endorsement was being sought from the APC and Barnsley clinicians for the Barnsley guidance to be replaced with the South Yorkshire guidance document presented. The main differences were highlighted and include: -

- The Barnsley primary and secondary prevention guidelines are separate documents, done that way following feedback from primary care.
- The Barnsley guidelines state the traffic light classifications of the different drugs, added following feedback from primary care.
- The local lipid clinic contact details have been added to the Barnsley guidelines.
- The Barnsley primary prevention guideline has been recently updated in line with the updated national summary in March 2024.

The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) advised that when the guidance was taken to the LMC for endorsement, it was not made clear to clinicians that it would replace the current Barnsley guidance.

It was agreed that the guidance would be sent to the LMC GP (MM) for checking and to seek approval from the LMC.

**Agreed action: -**

- The guidance to be sent to the LMC GP (MM) for checking and to seek approval at the next LMC meeting.

**MM**

SY ICS Medicines Adherence Support Pre-Assessment & Review Form

This is for use, should practitioners wish to, before referral to a pharmacy. This is on the IMOC website.

**APC 25/09**  
25/09.1

**BARNSELEY APC REPORTING**

APC Reporting November 2024

The November reports will be brought to the next meeting.

25/09.2

Entresto Shared Care Arrangements

The MO Lead Pharmacist, SY ICB advised that the Lead Pharmacist and Senior Interface Pharmacist, BHNFT had been contacted about this prior to the meeting, sharing with APC members that an APC report and queries from several practices in recent weeks have been received regarding the shared care process for Entresto, as the wording in the shared care guideline doesn't appear to reflect what is happening in practice. Shared care is being requested when Entresto is initiated rather than when the patient is stabilised at 12 weeks as stated in the guidance. Examples of some of the queries received were shared.

The Senior Interface Pharmacist, BHNFT was asked if there had been any recent changes in practice and was asked to clarify the Barnsley process, for example, are patients being followed up by the cardiologists or the specialist heart failure nurses during the stabilisation process.

The Senior Interface Pharmacist, BHNFT advised that it was their understanding that when the consultant starts Entresto in secondary care, the community heart failure nurses follow up, monitor and dose adjust, noting that the community heart failure nurses are based at SWYPFT so clarity would need to be sought from SWYPFT about how they communicate this to primary care, and when they request shared care.

As per the shared care pathway, it was stressed by primary care that patients need to be monitored carefully by secondary care whose responsibility it is following initiation to stabilise the patient dose for 12 weeks before requesting shared care. Requesting shared care on initiation will result in primary care rejecting the request.

It was noted that the shared care guideline is due to be reviewed, and any change in the pathway for management of patients, for example, monitoring by the heart failure nurses, would need to be reflected in the shared care guideline, and feedback would need to be obtained from the cardiologists and heart failure nurses.

The MO Lead Pharmacist, SY ICB advised that the Senior Pharmacist, SY ICB (DC) was also suggesting, before any updates

were made to the shared care guideline, that we take it to the IMOC subgroup to consider whether it would be a joint guideline across South Yorkshire, or whether it would remain at Place.

The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) referred to some issues around communication and the wording of communication coming from the Trust to GPs, some of language appeared aggressive and not helpful. There was a request for this to be picked up as a separate issue as it was important to help maintain relationships and support one another in the best interests of the patients of the interface.

The Associate Medical Director, BHNFT apologised on behalf of the Trust, advising this could reflect the amount of stress staff are under and not how they value colleagues in primary care. He would be happy to work with the Lead Pharmacist, BHNFT to ensure it doesn't continue.

It was agreed that any further inappropriate communication issues would be reported through APC reporting and repeated instances escalated to the Associate Medical Director and Lead Pharmacist, BHNFT for internal conversations to take place.

**Agreed actions: -**

- Seek feedback from the Lead Pharmacist, SWYPFT regarding the SWYPFT process.
- Seek feedback from the IMOC subgroup regarding developing a South Yorkshire Entresto Shared Care Guideline.

**TW**

**JH**

**APC 25/10**  
25/10.1

**NEW NICE TECHNOLOGY APPRAISALS**

NICE TAs December 2024

In the absence of the Lead Pharmacist. BHNFT, the applicability of the following NICE TAs would be advised at the next meeting: -

**GT**

- TA1021 Crizotinib for treating ROS1-positive advanced non-small-cell lung cancer
- TA1022 Bevacizumab gamma for treating wet age-related macular degeneration
- TA1023 Elranatamab for treating relapsed and refractory multiple myeloma after 3 or more treatments
- TA1024 (terminated appraisal) Toripalimab with chemotherapy for untreated advanced oesophageal squamous cell cancer
- TA1025 Ublituximab for treating relapsing multiple sclerosis
- TA1026 Tirzepatide for managing overweight and obesity

25/10.2

Feedback from BHNFT Clinical Guidelines and Policy Group

There was nothing to report.

25/10.3

Feedback from SWYPFT NICE Group

There was no representative in attendance.

**APC 25/11**  
25/11.1

**FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS**

Primary Care Quality & Cost-Effective Prescribing Group (QCEPG)

As previously advised, the group has temporarily been stepped down following the reorganisation, noting that a financial oversight group for the system has been established, therefore there was nothing to report.



- 25/11.2      BHNFT  
There was nothing to report, other than what was discussed at 25/04.3.1 about apprehension around the GP collective action and working to contract. As said at previous meetings, we are supportive in terms of wanting to support primary care as colleagues but want to make sure that patients are not disadvantaged.
- 25/11.3      SWYPFT Drug and Therapeutics Committee (D&TC)  
The MO Senior Pharmacist, SY ICB provided an update on behalf of the Lead Pharmacist, SWYPFT, sharing the Greenlight Alert for Iodine Dressings that was approved at the last D&TC meeting (for information), and advising that the PGD for varenicline has been approved. SWYPFT have liaised with Community Pharmacy South Yorkshire in terms of getting the message out to community pharmacies and the fee has been standardised across the areas.
- 25/11.4      Community Pharmacy Feedback  
There was no representative in attendance.
- The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) provided a brief update for the Associate Medical Director, BHNFT on the community pharmacy position with regards to funding and delivering services. The ICB are trying to work with them to build networks and links between GP practice and community pharmacy to do the best for the pharmacies and the GP practices.
- 25/11.5      Wound Care Advisory Group  
The group have not met since the last APC, therefore there was nothing to report.
- APC 25/12      ISSUES FOR ESCALATION TO THE BARNSLEY PLACE QUALITY & SAFETY COMMITTEE (JANUARY 2025)**  
There were no issues to escalate to the Barnsley Place Quality and Safety Committee.
- APC 25/13      FORMULARY ACTIONS**
- 25/13.1      SPS Newsletter- November 2024  
Received and noted for information.
- 25/13.2      RDTC Horizon Scanning Document – November 2024  
Received and noted for information.
- 25/13.3      IMOC Horizon Scanning January 2025  
The MO Lead Pharmacist, SY ICB presented enclosure J detailing the traffic light classifications that were to be agreed at today's January 2025 IMOC meeting. If agreed at today's IMOC meeting, the formulary changes for Barnsley would be as follows: -
- Donanemab – non-formulary grey
  - Thiamine hydrochloride injection (new intramuscular injection/ intravenous infusion formulation) – formulary red (to be confirmed)
  - Liraglutide biosimilar – to be discussed further at IMOC subgroup
  - Ublituximab – to be classified by IMOC on the publication of the NICE TA

**TW**

- Fosdenopterin to be classified by IMOC on the publication of the NICE TA
- Danicopan – classified red by IMOC – BHNFT to advise if applicable for use at BHNFT

GT

The formulary changes were approved by the Committee.

**Agreed action: -**

- As the meeting was not quorate, approval will be obtained outside the meeting by email.

JH

**Post meeting note:** approval received by email; therefore, the formulary changes were approved by the Committee.

**Post meeting note:** - Fosdenopterin: it was confirmed at the January 2025 IMOC meeting that the NICE HST now has an expected publication date: TBC. Therefore, this was assigned a grey traffic light classification at IMOC. This will therefore be assigned a non-formulary grey classification on the Barnsley Formulary.

**Post meeting note:** BHNFT confirmed that thiamine hydrochloride injection (new intramuscular injection/ intravenous infusion formulation) should be classified as formulary red (this is the first licensed thiamine injection and will replace the use of unlicensed thiamine injections).

APC 25/14  
25/14.1

**SAFETY UPDATES**

MHRA Drug Safety Update (December 2024)  
Received for information.

25/14.2

IMOC Safety Paper (January 2024)

The MO Lead Pharmacist, SY ICB presented the IMOC Safety Paper, and highlighted the following alerts: -

- CAS alert for the use of antiviral medicines and influenza. Prescribers working in primary care may now prescribe in line with the NICE and UKHSA guidance for the prophylaxis and treatment of influenza at NHS expense and community pharmacists may now supply the antiviral medicines (oseltamivir and zanamivir).
- CAS alert for a Class 2 Medicines Recall: Wockhardt UK Limited, WockAIR 160 microgram/4.5 microgram, inhalation powder. One batch has been recalled as a precautionary measure following the identification of a low number of units which may have a defect resulting in a dose not being able to be dispensed. Whilst a defect has been identified, it does not affect all inhalers within this batch. If a patient were to receive an inhaler with a defect, the defect would be obvious from the first attempted use of the product as the inhaler would not provide a dose. Open prescribing shows 7 items prescribed in SY ICB in September 2024. This is not on the Barnsley formulary but raised for awareness. Any inhalers affected by the defect should be returned to the pharmacy.

- CAS NatPSA alert for the Shortage of Pancreatic enzyme replacement therapy (PERT), with some additional actions for the ICBs, to be directed by the ICB executive lead.

**APC 25/15      SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE  
MINUTES (FOR INFORMATION)**

The minutes from NHS South Yorkshire ICB Doncaster Place & Bassetlaw Place Medicines Optimisation Committee (PMOC) (21<sup>st</sup> November 2024) were received and noted for information.

**APC 25/16      ANY OTHER BUSINESS**

None.

**APC 25/17      DATE AND TIME OF THE NEXT MEETING**

The time and date of the next meeting was confirmed as Wednesday, 12<sup>th</sup> February 2025 at 12.30 pm via MS Teams.

ADOPTED