

**Minutes of the Lancashire Medicines Management Group Meeting
Held on Thursday 9th January 2014 at Preston Business Centre**

PRESENT:

Dr Tony Naughton (TN)	Chair of LMMG	Lancashire CCG Network
Alastair Gibson (AG)	Director of Pharmacy	Blackpool Teaching Hospitals NHS Foundation Trust
Dr Emile Li Kam Wa (LKW)	Consultant Physician	Blackpool Teaching Hospitals NHS Foundation Trust
Christine Woffindin (CW)	Medicines Information Manager	East Lancashire Hospitals NHS Trust
Dr Catherine Fewster (CF)	Chief Pharmacist	Lancashire Care NHS Foundation Trust
Melanie Preston (MP)	Assistant Director - Medicines Optimisation	NHS Blackpool CCG
Dr Lisa Rogan (LR)	Head of Medicines Commissioning	NHS East Lancashire CCG, NHS Blackburn with Darwen CCG
Louise Winstanley (LW)	Lead Pharmacist	NHS Fylde and Wyre CCG
Kenny Li (KL)	Senior Manager – Medicines Optimisation	NHS Lancashire North CCG
Dr Kamlesh Sidhu (KS)	GP Prescribing Lead	NHS Lancashire North CCG
Pauline Bourne (PB)	Senior Pharmacist, Medicines Management, Deputy Chief Pharmacist	University Hospitals of Morecambe Bay NHS Foundation Trust

IN ATTENDANCE:

Elaine Johnstone (EJ)	Senior Executive – Medicines Management	NHS Staffordshire and Lancashire CSU
Brent Horrell (BH)	Head of Medicines Commissioning	NHS Staffordshire and Lancashire CSU
Julie Lonsdale (JLon)	Head of Medicines Performance	NHS Staffordshire and Lancashire CSU
Warren Linley (WL)	Senior Medicines Commissioning Pharmacist	NHS Staffordshire and Lancashire CSU
Jane Johnstone (Minutes)	Administrator	NHS Staffordshire and Lancashire CSU

ITEM	SUMMARY OF DISCUSSION	ACTION
2014/001	Welcome & apologies for absence The Chair welcomed everyone to the meeting. Apologies for absence were noted on behalf of Dr Sigrun Baier, George Nasmyth, Gareth Price, Dr Tom Marland, Dr David Shakespeare, Dr Pervez Muzaffar, Julie Landale, Nicola Baxter, and Nicola Schaffel.	
2014/002	Declarations of interest pertinent to agenda None	
2014/003	Declaration of any other urgent business None	
2014/004	Minutes of the last meeting 12 December 2013 The minutes of the meeting held on 12 December 2013 were agreed as a true and accurate record.	

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	<p>Updates from the action points (from the last meeting)</p> <p><i>2013/150 Melatonin</i> Provide Mersey Leaflet Update: NB to circulate upon return from annual leave.</p> <p><i>2013/160 Lancashire RAG List Harmonisation</i> Update: No further information received at this time – CSU still awaiting responses from CCGs.</p> <p><i>2013/169 LMMG New Medicine Reviews Work Plan update</i> Add NRT products to the LMMG work plan – this has been added to the work plan. A discussion took place about whether NRT products should be looked at more widely rather than just nicotine strips. A decision was made to look at all products when this piece of work begins, though still to do an individual medicine review on nicotine strips.</p> <p><i>2013/170 Horizon Scanning Quarter 4 2012-14</i> Investigate Lurasidone/Schizophrenia further and bring back to the LMMG if it is to go on the Lancashire Care formulary Update: This is impending and will be brought back in March.</p> <p><i>2013/171 New Nice Technology Appraisal guidance for medicines November 2013</i> Ranibizumab, Bosutinib, Peg Interferon Alfa, Fluocinolone, Canakinumab Update: These have been added to the website. Blueteq forms have been completed for Ranibizumab and Fluocinolone.</p> <p><i>2013/176 Lancashire Shared Care Guidelines</i> Prioritise SCGs on a Lancashire wide basis for the February meeting Update: A meeting took place following the last LMMG, however not all CCGs were represented. LW to share the responses received so far so these can be collated.</p>	<p>NB</p> <p>CCG Med Man Leads</p> <p>BH</p> <p>CF</p> <p>LW</p>
2014/005	<p>Matters arising (not on the agenda)</p> <p>There were no matters arising</p>	
NEW MEDICINES REVIEWS		
2014/006	<p>Golimumab – moderate to severe ulcerative colitis</p> <p>As a result of the extended consultation period for Golimumab the following responses were noted:-</p> <p>5 CCGs – All 5 agreed with the draft recommendation 3 CCGs - no responses 2 <i>Acute Trusts</i> – 1 in support of the draft recommendation and the other did not agree with the draft recommendation but wanted to</p>	

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	<p>await further studies. Clarification on this comment has been sought from the trust, but no response has been received to date. <i>2 Acute Trusts</i> – no responses.</p> <p>The decision was made by the LMMG members to support the recommendation that Golimumab is not recommended for the treatment of moderately to severely active ulcerative colitis in adult patients.</p> <p>Action:</p> <p>WL to update the recommendation and upload to the website</p>	
2014/007	<p>LMMG – New medicine review work plan update BH gave a summary of the new medicines review work plan:-</p> <p>The COPD medications are currently out to consultation and will be brought to the next LMMG meeting.</p> <p>A discussion took place regarding the recent launch of a new medicine for COPD (Relvar Ellipta) and how this sat with the work which is currently on-going for the single medicines. BH agreed to add this medicine to the work plan for review but that the current work including agreeing a guideline would continue in its current form.</p> <p>Tocilizumab/Abatacept Monotherapy – the evidence review is on-going.</p> <p>Canagliflozin – prices have been supplied by the company but these have still not been confirmed by the DoH. The review will be sent out for consultation once final prices are confirmed.</p> <p>Lubiprostone – this will be brought to the meeting in April.</p> <p>Nicotine strips – the evidence review has started. The single evidence review for nicotine strips will be fed into the wider piece of work around NRT products.</p> <p>Eltrombopag – NHS England have stated that Thrombocytopenia is a CCG commissioning responsibility; therefore, an evidence review will be added to the work plan.</p> <p>Rivaroxaban – BH and JLon have met with the clinical networks - in June with the Cardiac lead and November with Julie Cheatham to raise issues around the DVT pathway and still await their published plans. BH to chase these with the clinical network. The question was raised whether there is a respiratory network; JLon said that this is currently being explored and will be raised with Julie Cheatham.</p> <p>Ticagrelor pathway – WL has just received a draft pathway setting out where ticagrelor would be appropriate. This will be reviewed and assuming that it does not require major amendment is</p>	<p>BH</p>

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	<p>planned to be brought to the March meeting.</p> <p>Actions Add Relvar Ellipta to the work plan Add Eltrombopag to the work plan Amend the work plan template to include information on who the requesting clinician is and which organisation they are from.</p> <p>Chase the work plans and structures with the clinical network Enquire further about time scales for a respiratory network via Julie Cheatham</p> <p>WL to look at the draft of Ticagrelor pathway and bring to the March meeting.</p>	<p>JLon</p> <p>WL</p>
NATIONAL DECISIONS FOR IMPLEMENTATION		
2014/008	<p>New NICE Technology Appraisal Guidance for Medicines December 2013</p> <p>No new NICE Technology Appraisals published in December 2013.</p>	
2014/009	<p>New NHS Endland medicines commissioning policies December 2013</p> <p>No new NHS England Medicines Commissioning Policies published in December 2013.</p>	
PROCESS PROPOSALS		
2014/010	<p>Omega 3 Fatty Acid Compounds</p> <p>JLon gave an overview of the updated position statement for Omega 3 Fatty Acid Compounds prescribing in post MI patients. JLon also informed the group that the NICE clinical guideline had been amended to include all omega 3 fatty acid preparations and not just Omacor, the updated position statement brings the statement in line with the NICE recommendation. All attendees agreed with the recommendation not to use Omega 3 fatty acid compounds in the treatment of post MI patients the NHS in Lancashire.</p> <p>Action:</p> <p>The updated position statement to be uploaded to the LMMG website.</p>	<p>JL</p>
GUIDELINES and INFORMATION LEAFLETS		
2014/011	Terms of Reference Review	

ITEM	SUMMARY OF DISCUSSION	ACTION
	<p>In view of the on-going discussions at the Lancashire CCG Network about collaborative commissioning arrangements and also national legislation it was suggested to extend the current terms of reference for a six month period.</p> <p>The decision making process at LMMG was discussed and the possibility of a Lay person at either LMMG or CCG level. It was decided to amend the Terms of Reference to move the Lay person as a member of LMMG for the time being. However, it was highlighted that this needed to be considered again as the Terms of Reference are updated.</p> <p>It was also agreed that the Relationship Map should be updated to reflect the changes in the organisational structure. E.g. the Pharmacy Transformation Board is now referred to as the Local Professional Network and Strategic Clinical Networks need to be represented in the map.</p> <p>Action Remove the Lay person from the Terms of Reference but keep as part of the discussions in July. Update the relationship map. Present this change to the CCG Network for ratification.</p>	<p>EJ</p>
<p>2014/012</p>	<p>LMMG review of 2013</p> <p>EJ gave an overview of the paper which showed the work carried out over the last 12 months. TN discussed how the CCG network and CAG group came about, their purpose and where they sit with the LMMG. It was suggested that further information from the CCG network about their clinical networks would be useful.</p> <p>All LMMG attendees were invited to take part in a workshop to present questions/comments to identify areas for future development/improved ways of working with provider organisations for the group. The following areas were looked at to see how the LMMG could develop in the future:-</p> <ul style="list-style-type: none"> • Links with Clinical networks • Relationship with the CCG network • Role and remit of LMMG itself • Role of Provider organisation • Clinician engagement across the whole of Lancashire • Any other business <p>After this exercise, each attendee had 2 markers to place on the most significant comments (on each of the 5 areas). The comments/summary can be found in the document attached to the minutes.</p> <p>Action Ask Julie Cheatham (CCG network) for a list of the clinical networks and their Terms of Reference for information.</p>	<p>BH</p>

ITEM	SUMMARY OF DISCUSSION	ACTION
ITEMS FOR INFORMATION		
2014/013	Minutes of the Lancashire Care FT Drug and Therapeutic Committee 26th November 2013 The minutes were brought for information by CF.	
<p>Requests for agenda items Requests for agenda items should be sent to medicinesmanagement@lancashirecsu.nhs.uk by 24th January 2014</p> <p>Date and time of the next meeting 13th February 2014, 9.30 am to 11.30 am, Meeting Room 1, Preston Business Centre</p>		

**ACTION SHEET FROM THE
LANCASHIRE MEDICINES MANAGEMENT GROUP
9 JANUARY 2014**

MINUTE NUMBER	DESCRIPTION	ACTION	DATE
	MATTERS ARISING: ACTION SHEET FROM THE 9th JANUARY 2014 MEETING		
2014/006	Golimumab – moderate to severe ulcerative colitis WL to update the recommendation and upload to the website	WL	16/1/14
2014/007	LMMG – New medicine review work plan update Add Relvar Ellipta to the work plan Add Eltrombopag to the work plan Add onto the work plan who the requesting clinician is and which organisation they are from Chase the work plans and structures with the clinical network Enquire further about time scales for a respiratory network via Julie Cheatham. WL to look at the draft of Ticagrelor pathway and bring to the March meeting.	BH JLon WL	13/02/14 13/02/14 13/03/14
2014/010	Omega 3 Fatty Acid Compounds The updated position statement to be uploaded to the LMMG website.	JL	16/1/14
2014/011	Terms of Reference Review Remove the Lay person from the membership section of the Terms of Reference, but keep as part of the discussions in July. Present this to the CCG Network for ratification.	EJ	13/02/14
2014/012	LMMG review of 2013 Ask Julie Cheatham (CCG network) for a list of the clinical networks and their Terms of Reference for information.	BH	13/02/14