

**Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on
Wednesday, 9th July 2025 via MS Teams**

MEMBERS:

Erica Carmody (Chair)	Medicines Optimisation Senior Pharmacist, Strategy & Delivery Barnsley & Doncaster (SY ICB)
Dr Kapil Kapur	Consultant Gastroenterologist (BHNFT)
Dr Munsif Mufalil (from 25/136.3)	General Practitioner (LMC)

IN ATTENDANCE:

Nicola Brazier	Medicines Optimisation Business Support Officer (SY ICB)
Deborah Cooke	Senior Pharmacist, Strategy and Delivery, Barnsley & Clinical Effectiveness (SY ICB)
Joanne Howlett	Medicines Optimisation Lead Pharmacist, Strategy and Delivery Barnsley (SY ICB)
Gillian Turrell	Lead Pharmacist (BHNFT)

APOLOGIES:

Professor Adewale Adebajo	Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT)
Patrick Cleary	Lead Pharmacist - Barnsley BDU/Medicines Information (SWYPFT)
Chris Lawson	Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB)

**ACTION
BY**

APC 25/124 QUORACY

The meeting was not quorate therefore any proposed decisions or approvals made will be ratified for endorsement either outside of the meeting by email or at the next meeting.

JH/NB

APC 25/125 DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA

There were no declarations of interest relevant to the agenda to note.

APC 25/126 DRAFT MINUTES OF THE MEETING HELD ON 11st JUNE 2025

The minutes were approved as an accurate record of the meeting.

Agreed action: -

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

NB

Post meeting note: approval received by email from the LMC GP (MM).

APC 25/127 MATTERS ARISING AND APC ACTION PLAN

25/127.1 NICE TAs (April 2025)

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

- TA1054 Ruxolitinib for treating acute graft versus host disease that responds inadequately to corticosteroids in people 12 years and over

GT

25/127.2	<u>Action Plan – other</u> <u>Ticagrelor Audit</u> The Lead Pharmacist, BHNFT advised that the Trust were still planning to undertake a ticagrelor re-audit, but this has not been progressed due to workload capacity in the pharmacy and audit teams. It was queried at the April 2025 meeting, and clarity was required around the audit criteria to be used as Ticagrelor is used in cardiology and stroke, where the directions are different. Following discussion, as it was ascertained that for the stroke patients ticagrelor would be used long term rather than for a fixed duration, it was more pertinent to cardiology use as it was around whether a timeframe was specified on the D1, and therefore it was agreed to focus the re-audit on cardiology patients only as per the original audit, unless we start receiving APC reports that there is no indication specified on the D1. It was agreed to change the target date to October 2025.	NB
25/127.3 25/127.3.1	<u>Target dates</u> <u>Combination anticoagulant and antiplatelet treatment for patients with concomitant AF and ACS Guideline</u> The Lead Pharmacist, BHNFT to liaise with the Cardiology Lead to check updates to the European and UK guidelines, to then progress with updating the local guideline.	GT
25/127.3.2	<u>Immunosuppressants - dermatology guidelines</u> The Lead Pharmacist, BHNFT to discuss with the dermatology service managers to then advise a revised target date.	GT
25/127.3.3	<u>Actions – APC/IMOC</u> The MO Senior Pharmacists, SYICB (EC/DC) plan to review the action plan to determine if any actions could be transferred to the IMOC or IMOC subgroup and be removed from the APC action plan, where appropriate. It was acknowledged that some actions will remain at Place due to different approaches such as drug specific guidelines and disease specific guidelines.	
APC 25/128	BARNSELY ASTHMA GUIDELINE (MINOR UPDATES) The MO Lead Pharmacist, SYICB, presented the guideline which has received minor updates. A summary of the changes was noted. <ul style="list-style-type: none">• Addition in ‘when to refer’ box page 3 of: ‘asthma remains uncontrolled after 3 months following treatment optimisation’ and ‘Complicated multi-morbidity’.• Page 4: Removal of the wording ‘Not all budesonide/formoterol inhalers currently have a licence to be used as a reliever alone without regular maintenance doses’ as the current available budesonide/formoterol inhalers all now have a license for AIR.• Page 4: Addition of named inhalers in the top AIR box (Fobumix Easyhaler® 160/4.5 (first line) and Symbicort® 200/6).• Page 4: Addition of wording to Luforbec® to say usually prescribed to be administered with a spacer device.	

- Page 4: Moving of inhalers in boxes 2 and 3 so that steroid types are grouped together. Page 6: changes made in line with this.

Changes have been made to the formulary, noting that Fobumix Easyhaler® 160/4.5 is the first line for AIR therapy in 12 years and older with mild asthma in line with the Barnsley Asthma Guideline.

The updated guideline has been shared with the LMC, but no comments received yet, noting that the July meeting is yet to take place. Approval to be obtained from the LMC.

A minor spelling error was noted on page 3 and this would be amended.

Subject to approval from the LMC, the Committee approved the updated Barnsley Asthma Guideline.

Agreed actions: -

- Spelling error to be corrected on page 3.
- Approval to be obtained from the LMC.
- As the meeting was not quorate, approval will be obtained from SWYPFT and the LMC.

JH
JH/MM
JH/MM/
PC

Post meeting note: *approval received by email from the Lead Pharmacist, SWYPFT.*

APC 25/129 SOUTH YORKSHIRE MEDICINES OPTIMISATION WEBSITE

The Senior Pharmacist, SY ICB (DC) informed the Committee that meetings have recently taken place regarding moving towards a cloud based South Yorkshire MO website. The website is in the process of being developed and the plan going forward is for all medicines guidelines from across South Yorkshire to be hosted on this central website.

Further meetings are to take place and engagement with relevant stakeholders has been or is due to be undertaken, with Committee members invited should they wish to be involved. Further consideration and discussions will need to take place in relation to the Barnsley BEST website where medicines and prescribing guidelines are currently hosted.

Further updates will be brought back to the Committee.

APC 25/130 APC TERMS OF REFERENCE

The MO Senior Pharmacist, SY ICB (EC) advised that the annual review of the APC Terms of Reference was due, and was brought to last month's Committee meeting where it was agreed that due to the ICB organisational changes being implemented it would be better to bring the document back to this month's meeting and link with discussions on how the APC functions will alter in light of the proposed ICB organisational changes.

At that point, a proposed ICB structure was expected to be shared early July for consultation. However, we have now received advice from NHS England not to proceed until national discussions are

concluded about how the cost of redundancies will be met and how this will be handled in the context of this year's financial plan. We have also received the NHS England 10 year plan letter which gives an insight into the immense scale of the NHS England reorganisation planned by the government, which will require some working through.

Therefore, with the level of uncertainty in both the short and long term, it was agreed that the Committee continues with its current day to day working and that we review the Terms of Reference in line with the agreed annual review timeframe, making only minor changes that are required to designations at this point in time. Time will be protected on next month's agenda for an opportunity to discuss the NHS England changes being proposed and how this will affect the Committee.

Agreed actions:-

- Minor changes to be made to designations for approval.
- Discuss the NHS England changes being proposed and how this will affect the Committee at the next meeting.

**NB
CL**

APC 25/131 SHARED CARE GUIDELINES/AMBER G SHARED CARE GUIDELINES

There were no guidelines to approve this month.

25/131.1

Primary Care Locally Commissioned Service Review (Shared Care)

The Committee were updated on the progress against the ICB plan which was shared a few months ago. A paper outlining principles was taken to the ICB Operational Executive, which was supported. A volume-based reimbursement model, akin to the current Barnsley model, was favoured. Following this, engagement with stakeholders (LMC) around costing and potential funding has taken place, however an agreement has not been reached, and a new approach may be required. There is still no timeline for resolution.

Heidi Taylor, PDMO has asked for any intelligence regarding the delays impacting on services and patients to be shared and this can be sent direct to her or via the Barnsley Place MO team. We will continue to provide a progress update to the Committee.

The Lead Pharmacist, BHNFT advised that information regarding shared care refusals received by the Trust has been shared with PDMO (HT) and that this can be accessed on an MS Teams channel. The Senior Pharmacist, SY ICB (DC) to liaise with the PDMO (HT) to gain access to the channel for awareness to help with queries received direct to the Barnsley Place MO team.

DC

APC 25/132 FORMULARY

This is a standing agenda item and the Senior Pharmacist, SY ICB (DC) advised there was no specific update to report this month. An update will be provided once the desk-based reviews are in progress.

APC 25/133 NEW PRODUCT APPLICATION LOG

The new product application log was received for information, noting that the wound care product applications were being finalised for approval at the Wound Care Group before coming to the Committee for consideration/approval.

APC 25/134 SOUTH YORKSHIRE INTEGRATED MEDICINES OPTIMISATION COMMITTEE (SY IMOC)

25/134.1 SYICB IMOC Ratified Minutes – 4th June 2025

The minutes were received for information.

25/134.2 SYICB IMOC Verbal Key Points – 2nd July 2025

The MO Lead Pharmacist, SYICB provided an update on key points from the July 2025 meeting.

25/134.2.1 Tirzepatide Type 2 diabetes in Adults Amber G Guideline

Information from the Faculty of Reproductive Health has been added to the guideline. One of the most common side effects of Tirzepatide initiation is vomiting, therefore it is advisable to switch to a non-oral contraceptive method or add a barrier method of contraceptive upon initiation of Tirzepatide therapy for 4 weeks or after each dose increase for 4 weeks. Information about HRT has also been added, advising that Tirzepatide delays gastric emptying and therefore may decrease the absorption of any oral component of HRT. Women taking oral HRT may be advised to switch to a non-oral therapy while using Tirzepatide and for a minimum of 4 weeks after stopping. Further information is available from the British Menopause Society Tools for Clinicians document.

25/134.2.2 Tirzepatide for weight management FAQs for primary care Clinicians

These were taken to IMOC for information and had already been circulated. There are also some FAQs for patients available on the ICB website.

25/134.2.3 Lipid modification for primary prevention of cardiovascular disease in younger adults, aged 18-40 with Type 2 diabetes guidance

This guidance was approved subject to minor amendments. To be used alongside the existing lipid management pathways, designed to support clinicians with carrying out a full formal cardiovascular disease risk assessment as recommended by the NICE guidelines produced in 2023, in people with early onset type 2 diabetes so the Q risk score may underestimate the cardiovascular disease risk in young people with type 2 diabetes.

25/134.2.4 Shared Care Protocol for Acarizax and Grazax for allergic rhinitis to grass pollen or house dust mites

The protocol has received a minor update to incorporate information from the NICE TA for Acarizax published in March 2025.

25/134.2.5 Polypharmacy SMR Resources

The resources created by the Health Innovation Network were approved for use. They can be used in addition to the SMR process to help support both clinicians and patients in shared decision making, understanding polypharmacy, and deprescribing during an SMR. There are various leaflets available, including 'Safely stopping your medicine', 'Me and my medicines charter' 'reviewing your medicines' that can be used as an invitation, plus some easy read leaflets.

The Senior Pharmacist, SY ICB (DC) provided some additional feedback from the IMOC subgroup meeting in relation to monitoring with DOACs. It was noted that it has been agreed that the Non-

Valvular AF Guidance would be updated as a South Yorkshire guideline. It was noted that feedback had been received from a GP practice regarding the frequency of monitoring seeking the organisation's view to a pragmatic approach. It was noted that there was some national guidance in terms of the NICE clinical knowledge summaries, and the frequency of monitoring was updated last year for frail patients and patients over 75 years. This feedback has been shared with colleagues that will be reviewing the guidance and input from the Lead Pharmacist, BHNFT and colleagues would be appreciated. The updated draft guideline will be shared when available.

25/134.3

IMOC approved guidelines (for information)

There were no guidelines to note this month.

APC 25/135 BARNESLEY APC REPORTING

25/135.1

APC Reporting - May 2025

The Senior Pharmacist, SY ICB (DC) presented the May 2025 reports received directly to the ICB APC reporting mailbox, highlighting details from some of the reports.

There were several reports relating to duplicate documents received by a GP practice and each one refers to a significant number of multiple duplicates in relation to a combination of outpatient appointment letters and discharge letters. The practice manager has been helpfully reporting occurrences of duplicates for some time and it was recognised that there as there is an underreporting of issues this may be also be an issue in other practices. The clinical systems team are continuing to investigate these and have found that the issue is largely due to a combination of ICE user generated and ED validation process. The Senior Pharmacist, SY ICB (DC) to obtain more information about the ED validation process.

Report BAPC25/05/06 was highlighted which led to a prescribing error when the incorrect inhaler was inadvertently selected due to the drug name similarity. Information is in the process of being added to ScriptSwitch to highlight the similarity in drug names (Spiriva®/ Spiolto®).

The Senior Pharmacist, SY ICB (DC) advised that recent reports have been received relating to edoxaban being started in BHNFT as a first line DOAC instead of generic apixaban or rivaroxaban. Examples have been emailed to the Lead Pharmacist, BHNFT as discussed last month where it was agreed to share any examples going forward. An example was shared with the Committee with an ask for further awareness to be raised within secondary care of the position statement and of the work being undertaking in primary care. The Lead Pharmacist agreed to action this request.

Agreed action: -

- The Lead Pharmacist, BHNFT to raise further awareness within secondary care of the position statement and work being undertaking in primary care.

GT

APC 25/136 **NEW NICE TECHNOLOGY APPRAISALS**
25/136.1 NICE TAs June 2025

The Lead Pharmacist, BHNFT advised that the following NICE TA **was** applicable for use at BHNFT: -

- TA1067 Linzagolix for treating symptoms of endometriosis

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

- TA1068 (**terminated appraisal**) Tislelizumab for treating unresectable advanced oesophageal squamous cell cancer after platinum-based chemotherapy
- TA1066 Somapacitan for treating growth hormone deficiency in people 3 to 17 years
- TA1069 Efgartigimod for treating antibody-positive generalised myasthenia gravis
- TA1071 (Updates and replaces TA823) Atezolizumab for adjuvant treatment of resected non-small-cell lung cancer
- TA1072 (**terminated appraisal**) Tislelizumab for treating advanced non-small-cell lung cancer after platinum-based chemotherapy
- TA1073 Marstacimab for treating severe haemophilia A or B in people 12 years and over without anti-factor antibodies
- TA1078 (**terminated appraisal**) Fosdenopterin for treating molybdenum cofactor deficiency type A

The Lead Pharmacist, BHNFT provisionally advised that the following NICE TA **was** applicable for use at BHNFT:-

GT

- TA1070 Spesolimab for treating generalised pustular psoriasis flares

The Lead Pharmacist, BHNFT provisionally advised that the following NICE TA **was not** applicable for use at BHNFT:-

GT

- TA1074 Sparsentan for treating primary IgA nephropathy

25/136.2 Feedback from BHNFT Clinical Guidelines and Policy Group
There was nothing to report.

25/136.3 Feedback from SWYPFT NICE Group
There was no representative present, and no update provided.

APC 25/137 **FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS**
25/137.1 BHNFT

For awareness, the Lead Pharmacist, BHNFT advised that following a review of the format of the Trust's medicines optimisation meetings, she would continue to attend the Operational Group meeting but not the Medicines Management Committee, therefore will need to obtain feedback from the Chief Pharmacist for feedback from the Medicines Management Committee (Chair).

There was nothing to report from the Operational Group.

25/137.2 SWYPFT Drug and Therapeutics Committee (D&TC)
There was no representative present, and no update provided.

25/137.3 Community Pharmacy Feedback
There was no representative present, and no update provided.

25/137.4

Wound Care Advisory Group

The July meeting was well attended, and it was noted that the wound care policy, that covers the SWYPFT community nurses and the hospital nurses, is now in the process of being finalised, and will be shared when approved.

The wound care new product applications for Para fricta - booties and undergarments and Linovera cream/oil were being finalised for approval at the Wound Care Group before coming to the Committee for consideration/approval.

APC 25/138 ISSUES FOR ESCALATION TO THE BARNSELY PLACE QUALITY & SAFETY COMMITTEE (17th JULY 2025)

There were no issues to escalate to the Barnsley Place Quality & Safety Committee.

APC 25/139 FORMULARY ACTIONS

25/139.1

SPS Newsletter May 2025

Received and noted for information.

25/139.2

IMOC Horizon Scanning July 2025

The MO Lead Pharmacist, SY ICB presented enclosure J detailing the traffic light classifications agreed at the July 2025 IMOC meeting, noting the suggested Barnsley formulary status below: -

- Bevacizumab gamma (new ophthalmic formulation) – formulary red (NICE TA1022 is applicable to BHNFT)
- Nemolizumab (new medicine) - to classify when NICE TA is published (expected July 2025)
- Ruxolitinib (new topical formulation with new indication) – non-formulary grey (NICE TA in development)
- Sumatriptan + naproxen sodium (new combination formulation) – non-formulary grey (wording to be added to ScriptSwitch to note acquisition cost is lower if generic sumatriptan and generic naproxen are prescribed separately).
- Sildenafil citrate (new orodispersible tablet formulation) - Sildenafil, generic, for erectile dysfunction is already green across SY – wording to be added to ScriptSwitch to note high cost warning for the orodispersible sildenafil formulation compared to standard generic sildenafil tablets

The Barnsley formulary changes were approved by the Committee.

Agreed actions: -

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

JH/PC

Post meeting note: approval received by email from the Lead Pharmacist, SWYPFT, therefore the formulary changes were approved.

25/139.3

TLDL Sub-Group List June 2025

The MO Lead Pharmacist, SY ICB presented enclosure K noting the following suggested formulary change for Barnsley: -

- Eribulin - add to formulary as non-formulary red (TA423 not applicable to BHNFT)

The Barnsley formulary change was approved by the Committee.

Agreed actions: -

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

JH/PC

Post meeting note: approval received by email from the Lead Pharmacist, SWYPFT, therefore the formulary change was approved.

APC 25/140
25/140.1

SAFETY UPDATES

MHRA Safety Roundup (June 2025)

The update was noted with the following information highlighted: - Valproate (Belvo, Convulex, Depakote, Dyzantil, Epilim, Epilim Chrono or Chronosphere, Episenta, Epival, and Syonell ▼): updated safety and educational materials to support patient discussion on reproductive risks

The updates reflect the precautionary advice on the potential risk of neurodevelopmental disorders in children fathered by men taking valproate around the time of conception; and a risk of lower weight at birth for the gestational age in children exposed to valproate during pregnancy.

IXCHIQ Chikungunya vaccine: temporary suspension in people aged 65 years or older

The Commission on Human Medicines (CHM) has temporarily restricted use of the IXCHIQ Chikungunya vaccine in people aged 65 years and over following very rare fatal reactions reported globally. This is a precautionary measure while the MHRA conducts a safety review.

25/140.2

IMOC Safety Paper (July 2025)

The MO Lead Pharmacist, SY ICB presented the July 2025 IMOC Safety Paper and highlighted the following alerts: -

25/140.2.1

Class 2 Medicines Recall: Inhixa 12,000IU (120mg)/0.8mL solution for injection

Maxearn Limited have informed the MHRA that the carton used to package two imported batches of Inhixa have been released to the market with a typographical error on one side of the carton. The incorrect strength states "12,000 IU (20mg)/0.8 ml solution for injection" instead of the correct strength "12,000 IU (120mg)/0.8 ml solution for injection".

25/140.2.2

GLP-1 medicines for weight loss and diabetes: what you need to know

Following concerns these medicines are not being used safely, the MHRA has issued guidance for patients covering their uses, where to obtain them, risks, contraception and pregnancy, breastfeeding, depression or suicidal thoughts, and use around the time of surgery or an operation.

- 25/140.2.3 Senokot (sennoside or senna fruit extract, senna pods tinnevelly) products
Use in pregnancy and lactation is now contraindicated. The contraindication currently only applies to the Senokot brand. Scriptswitch will be updated to promote generic prescribing.
- 25/140.2.4 Bumetanide 1mg shortage National Patient Safety Alert
The Senior Pharmacist, SY ICB (DC) highlighted that a national patient safety alert has been circulated regarding a shortage of Bumetanide 1mg tablets. This has been sent directly to GP practices, but it was highlighted to the Committee as it has come with a very tight timescale for actions to be completed.
- The alert states that Bumetanide 1mg tablets are out of stock until mid-August 2025. Bumetanide 1mg/5ml oral solution and bumetanide 5mg tablets remain available, however cannot support any increase in demand, therefore some patients will need reviewing and potentially a switch to furosemide tablets considered.
- There is more information in the alert detailing monitoring information and the patient cohorts that should be prioritised for remaining supplies of bumetanide 1mg tablets.
- The Lead Pharmacist, BHNFT suggested liaising with community pharmacy around availability advising supplies were available through at least 1 wholesaler when checking stock availability. The Senior Pharmacist, SY ICB (DC) would feed this information back to possibly avoid reviewing and switching patients if stock was available.

APC 25/141 SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES (FOR INFORMATION)

The minutes from Sheffield Area Prescribing Group (APG) (17th May 2025) were received and noted for information.

APC 25/142 ANY OTHER BUSINESS

25/142.1 DMARD Shared Care Protocol

The MO Lead Pharmacist, SY ICB advised that the protocol has undergone a further minor amendment, adding within the hydroxychloroquine section that the SNOMED read code for hydroxychloroquine retinopathy screening be added to the patients record when they have had their retinol screening.

It was agreed that the protocol would be updated with this further amendment, along with the minor amendments noted at the last meeting and shared with the LMC GP (MM) for approval.

Agreed action: -

- The protocol to be updated and shared with the LMC GP (MM) for approval.

JH/MM

25/142.2 Shared Care Guideline for Amiodarone

The LMC GP (MM) referred to email communications about required clarity on what is meant by long term, with a request for the duration of use of Amiodarone to be specified. The MO Lead Pharmacist to take this request back and discuss with the Clinical Pharmacist reviewing the guideline.

JH

25/142.3

Organisational Change

The LMC GP (MM) raised concern around potentially losing MO Clinical Pharmacists with the ICB organisational change, and the impact this will have on the practice and patients.

It was noted that when the consultation period begins, this will be discussed at the APC and information will be shared via other communication routes giving colleagues chance to feedback about any structures that are shared and how it will impact the Barnsley practices. It was noted that the efficiencies are to streamline and make services more efficient so that money can go more into the front-line services, but it is being fed back and raised that we do have staff that support frontline services within the ICB, for example MO and CHC.

APC 25/143 DATE AND TIME OF THE NEXT MEETING

The time and date of the next meeting was confirmed as Wednesday, 13th August 2025 at 12.30 pm via MS Teams.

ADOPTED