

Greater Manchester Medicines Management Group

**Minutes of the meeting held on
 Thursday 11th June 2020
 1- 3 pm
 Virtual meeting**

Present:

Name	Title	Organisation	Representing	Apr	Jun	Aug	Oct	Dec	Feb	Apr	Jun
Dr Helen Burgess (HB)	GP MO Prescribing lead	NHS Manchester CCGs	Chair/GPs	✓	✓	✓	✓	✓	✓		✓
Dr Pete Budden (PB)	GP Prescribing lead	Salford CCG	FMESG								
Petra Brown (PeB) Or Jane Wilson (JW)	Chief Pharmacist Associate Director of Pharmacy	Pennine care NHS FT GM Mental Health NHS FT	GM Mental Health Organisations	✓	✓	A (JW)	✓	A	✓		✓ (JW)
Dr Richard Darling (RD)	GP Prescribing Lead	Heywood, Middleton and Rochdale CCG	PaGDSDG								
Kate Rigden (KR)	Deputy Chief Finance Officer	NHS Oldham CCG	CCG finance leads	✓	✓	✓	✓	✓	A		✓
Jay Hamilton (JH) Or Ruth Dales (RuD)	Program Development Lead Lead Pharmacist	GM AHSN	Health Innovation Manchester (HIM)	✓	A (De p)	✓	A	✓			✓ (RuD)
Dr Ann Harrison (AH)	GP MO Prescribing lead	Trafford CCG	GPs	✓	✓	✓	A	✓	A		✓
Robert Hallworth (RH)	Specialist Cancer Pharmacist	NHSE	NHSE Specialised Commissioning	✓	✓	✓	✓	✓	✓		✓
Peter Howarth (PH)	Head of Medicines Management	Tameside & Glossop CCG	CCG MO leads	✓	✓	✓	A (LB)	A (KL)	A (LB)		✓
Dr Daljit Saroya	Consultant Anaesthetist and Chair of MO committee at	Stockport FT	GM Secondary Care Clinicians								A

	Stockport FT										
Leigh Lord (LL)	Locality Lead Pharmacist	NHS Trafford CCG	CCG MO leads	✓	A	✓	✓	A	A (KL)		✓
Peter Marks (PM)	LPC Board Member	GM LPC	Community Pharmacy	✓	✓	✓	✓	✓	✓		✓
Karen O'Brien (KO'B)	Regional Pharmacist	NHSEI	NHSEI	✓	✓	✓	✓	✓	✓		✓
Margaret O'Dwyer (MO'D)	Director of Commissioning and Business Delivery / Deputy Chief Officer	Bury CCG	CCG Commissioning leads	✓	✓	✓	✓	✓	✓		✓
Dr Jeff Schryer	JCB clinical lead for MO	The GM Joint Commissioning Board (MO)	JCB								✓
Steve Simpson (SS)	Chief Pharmacist	Bolton FT	Chief pharmacists	✓	✓	A	A	A	✓		✓
Charlotte Skitterall (CS)	Chief Pharmacist	Manchester FT	HCDSG								✓
Claire Vaughan (CV)	Head of MO	Salford CCG	HCDSG	✓	✓	A	✓	A	A		✓
Dr Sanjay Wahie (SW)	Clinical Director	NHS Wigan CCG	GPs	✓	✓	✓	✓	✓	✓		✓
Dr Peter Elton	SCN representatives	Strategic Clinical Network	Strategic Clinical Network								✓
Vacant seat			Provider Board representative								
Vacant seat			Council representative for GM Social Services								
Vacant seat			GM Medical Directors								
Vacant seat			Lay representative								
Vacant seat			GM Public Health								
Sue Dickinson (SD)	Director of Pharmacy	RDTC		✓	✓	✓	✓	✓	✓		✓
Monica Mason (MM)	Head of Prescribing Support	RDTC	Professional secretary	✓	✓	✓	✓	✓	A (DN)		✓
Andrew Martin Kathryn Griffiths/	MO Pharmacist	GM Joint Commissioning team		✓ AM	✓ KG	✓ AM	✓ AM	✓ KG/ AM	✓ AM		✓
Andrew White	Head of MO	GM Joint Commissioning									✓

		team										
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1. General Business

1.1 Apologies

Apologies had been received in advance as noted above.

1.2 Declarations of Interest

None declared

2.0 Minutes and actions from the February meeting

The minutes from the February meeting (April meeting was cancelled due to CV-19), were agreed pending an amendment to the rebate section, after which they were approved for website publication. Outstanding actions to be restarted were agreed.

Action: MM to amend as above and publish to the website

3.0 GM Tobacco Addiction Guidance

This item was presented for approval, however was rejected by the group who asked that discussions be undertaken with commissioners.

Action: AM to take back to lead commissioners for further discussion

4.0 GMMMGM response to Regulation 28 Coroner's report

The group were briefed on the background to this case, the action required from GMMMGM and the proposal that a joint response was to be submitted from the three respondents requested in the report. The group discussed the wider issue around the commissioning and communication of shared care arrangements across GM, and that this was likely to be recommended as a priority area for GMMMGM support and development under item 8.

Action: AW to prepare the response to coroner from GMMMGM as part of the joint response, GMMMGM to prioritise its support to improvements to commissioning of shared care guidelines across GM

5.0 Primary Care Rebate Schemes

JCT presented this agenda item which includes recommendations to GMMMGM regarding two recently appraised primary care rebate schemes; these schemes are appraised against the GMMMGM framework. Should CCGs wish to sign up to these rebate schemes they must do so at a local level considering the savings available and the administration costs associated with each scheme.

Clenil Modulite CFC Free Inhaler – GMMMGM accepted the recommendation by JCT that this scheme meets the requirements of and complies with the GMMMGM ethical framework, and recommended that the scheme is accepted.

Rivaroxaban – GMMMGM accepted the recommendation by JCT that this scheme does **not** meet the requirements of the GMMMGM ethical framework, and recommended that the scheme is **not** accepted.

Action: These decisions to be communicated to CCGs.

6.0 GMMMGM subgroup decisions for ratification

GMMMGM approved the subgroup decisions which included technical updates to the antimicrobial guidelines, cow's milk protein allergy guideline, growth hormone in paediatrics SCP and first generation antipsychotic depots in adults SCP. There was no significant financial or commissioning impact expected through these decisions.

Action: Updated guidance to be published to the GMMMG website

7.0 GMMMG work plan performance monitor

JCT presented the monitor which details CCG and Trust performance in each of the agreed GMMMG 19/20 work streams. The improvements seen were encouraging and included further savings in the region of £1.1M attributable to CCGs efforts to reduce prescribing of drugs of low clinical value. It showed that GM performance against safety indicators was better than the national average, and that the national target for biosimilar adalimumab uptake had been achieved in January 2020.

Improvements in antimicrobial prescribing across GM were recorded as was a slight fall in prescribing rates of “over the counter” medicines, although unfortunately this was not matched with a fall in prescribing costs due to increases in unit prices of some items.

It was agreed that this information should return to GMMMG in July as an outturn report, and be highlighted to GM finance and commissioning teams to illustrate the progress made.

Action: AM/MO'D to add narrative to this report after which it will be resubmitted to GMMMG and then communicated to DoC/DFCOs/CCG MO leads and CPs.

8.0 GMMMG Recovery Restart Priorities

GMMMG members were thanked for their responses to the “recovery restart priority survey” which had been sent to all members in late May. A good response had been received from the sectors represented by the membership and six common themes had been identified as likely priority areas for GMMMG to refocus on; namely care homes, improvements in the commissioning of shared care protocols across GM, consideration of the impact of CV-19 on GM clinical guidelines with a particular focus on the BAME population health and outcomes, antimicrobial stewardship and outpatient redesign.

In addition feedback highlighted practices which sectors wished to let go i.e. lengthy face to face meetings, protracted governance and lengthy bureaucracy, and activity which didn't clearly add value, or have a clearly defined output benefitting the health of the GM population.

Activity which the group and its representative sectors wanted to see amplified were collaborative system leadership as seen through the CV-19 response, continued collaboration of GM with the rest of the NW, production or sharing of resources and guidance which provides a targeted, timely response to GM wide issues.

A draft work plan detailing current work streams which may be continued and new topics which may be added was considered by the group. It was agreed that a task and finish group would meet to prioritise these items, and that a July meeting would be held to approve revisions to the work plan and infrastructure to deliver it.

Action: MM/AM to prioritise key themes using matrix, consider current work programme against new priorities, and detail aims and plans in a paper for approval at the July meeting with necessary communication with leads prior to July.

9.0 Communication from Subgroups and Associated Committees

GMMMG subgroup minutes were accepted by GMMMG and an update on the work being done by PaGDSG was provided by RH.

GM CCG lead pharmacists – PH explained that the group had been meeting more regularly throughout in response to CV-19 and minutes had been replaced by an action log which would be shared.

GM Chief Pharmacists – SS provided update

GM Mental Health Trusts – updates were provided throughout the agenda items above

Health Innovation Manchester – RuD provided an update on the work streams being undertaken by HiM which included accelerated implementation of the integrated digital care record and TCAM, a CV-19 tracker developed for care homes, CV-19 input to the medicines safety improvement programme, and CV-19 research programmes.

GM Pharmaceutical Industry Partnership Group Meeting – no update

RMOC – SD provided this update and explained that RMOC had not met since February whilst member's efforts were redirected to CV-19. RMOC was looking to restart soon and would likely revisit its shared care work which had been nearing publication.

Date of next virtual meeting: Thursday 9th July 2020, 1 – 3pm