

Greater Manchester Medicines Management Group

Minutes of the meeting held on
Thursday 8th September 2022, 1- 3pm

Virtual meeting

Present:

Name	Title	Organisation	Representing	Nov	Feb	Mar	May	Jul	Aug	Sep
Dr Helen Burgess (HB)	GP MO Prescribing lead	NHS Manchester CCGs	GPs	✓	✓	✓		✓		✓
Petra Brown (PeB)	Chief Pharmacist	Pennine care NHS FT	GM Mental Health Organisations	✓	✓	✓	✓	A	✓	✓
Kate Rigden (KR)	Chief Finance Officer	NHS Oldham CCG	CCG finance leads	✓	✓	✓	✓	✓	A	✓
Mina Patel (MP)	Trust Finance Officer	MFT	Provider Finance				✓	✓	✓	✓
Jay Hamilton (TBC)		HiM	Health Innovation Manchester (HIM)		TV	A	✓	A	A	A
Dr Ann Harrison (AH)	GP MO Prescribing lead	Trafford CCG	GPs	✓	✓	A	✓	✓	✓	✓
Robert Hallworth (RH)	Specialist Cancer Pharmacist	NHSE	NHSE Specialised Commissioning	✓	✓	✓	✓	✓	✓	A
Dr Pete Budden	GP Prescribing lead	Salford CCG	GMMMG Clinical Reference Subgroup					✓	✓	✓
Peter Howarth (PH)	Head of Medicines Management	Tameside & Glossop CCG	CCG MO leads	✓	✓	✓	✓	✓	✓	A

Aneet Kapoor	Chair of the GM LPN	LPN	Pharmacy profession	✓	✓	✓	✓	✓	A	✓
Vacant seat			GM Secondary Care Clinicians							
Peter Marks (PM)	LPC Board Member	GM LPC	Community Pharmacy	✓	A	✓	✓	✓	✓	✓
Chris Haigh (CH)	HOMM	Bolton CCG	CCG MO leads and GMMMG Digital subgroup					✓	✓	✓
Luvjit Kandula (LK)	Chair – Community Pharmacy Provider Board (CPPB)	GM LPC	Community Pharmacy	A	A	✓	✓	A	✓	✓
Lara Shah (LS)	Deputy HOMM	MHCC	GMMMG Population health and inequalities subgroup					✓	✓	✓
Fiona Meadowcroft (FC)	Interim Deputy Director Strategy – Integrated Care	MHCC	CCG Commissioning lead	✓	✓	JW	A	A	✓	A
Kenny Li	HOMM	MHCC	GMMMG Medicines Value subgroup				✓	A	✓	✓
Faisal Bokhari or Heather Bury	Deputy HOMM	T&G CCG NHS GM IC	GMMMG Pharmacy workforce subgroup				✓ HB	✓	✓ HB	HB ✓
Karen O'Brien (KO'B)	Regional Pharmacist	NHSEI	NHSEI	✓	✓	✓	✓	A	A	✓
Rob Bellingham	Managing Director Greater Manchester Joint Commissioning Team	The GM Joint Commissioning Board (MO)	Joint Commissioning Board	✓	✓	A	✓	A	A	

Paul Buckley (PaB)	Chief Pharmacist	Stockport FT	GM Chief pharmacists	✓	A	A	✓	✓	✓	✓
Steve Simpson (SS)	Chief Pharmacist	Bolton FT	GM Chief pharmacists	✓	✓	✓	✓	A	✓	✓
Charlotte Skitterall (CS)	Chief Pharmacist	Manchester FT	Chair	✓	✓	✓	✓	✓	✓	A
Claire Vaughan (CV)	Head of MO	Salford CCG	Vice Chair of GMMMG and GMMMG Medicines Safety subgroup	✓	✓	✓	✓	✓	A	✓
Dr Sanjay Wahie (SW)	Clinical Director	NHS Wigan CCG	GPs	✓	✓	✓	✓	A	✓	✓
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							
Monica Mason (MM)	Head of Prescribing Support	RDTC	Professional secretary	✓	✓	✓	✓	A	✓	✓
Andrew Martin (AM)	MO Pharmacist	GM Joint Commissioning team	GMMMG support	✓	✓	✓	✓	A	✓	A
Andrew White (AW)	Head of MO	GM Joint Commissioning team	GMMMG support	✓	✓	✓	✓	✓	✓	✓
Dan Newsome (DN)	Principal pharmacist	RDTC	GMMMG support	✓	✓	✓	✓	✓	✓	✓

1. General Business

1.1 Apologies

As above. Claire Vaughan chaired the meeting.

Prof Soran attended the meeting to support the inclisiran discussion. Dr Richard darling was also in attendance

1.2 Declarations of Interest

Nil declared.

2.0 Minutes and actions from the last meeting

Minutes from the August meeting were approved for publication

The group were reminded that GMMMG continues to wait for delegated authority under the ICB to be approved, in the interim the last three months of GMMMG decisions had been submitted to the Clinical Effectiveness and Governance Committee (CEGC) meeting on 22nd September. GMMMG Chairs await instruction as to whether to submit the revised terms of reference to this committee, the GMMMG charter has been submitted as part of the July GMMMG decisions.

The lack of GMMMG work plan was discussed, it was noted that the priorities for GMMMG are outlined in the Charter, and that subgroups should be taking these priorities forward. Where there are no targets in the Charter it is because these were not available nationally or locally at the time, again GMMMG would look to the subgroup to propose these to GMMMG. The Charter does not specify all activity being undertaken by GMMMG, and capacity should be retained to enable GMMMG to complete its BAU in supporting equitable access to medicines through the GM formulary and pathway development.

There was some discussion around locality work plans vs GM-level activity, and GMMMG activity vs IPMO activity, particularly around the value workstream and the need for prioritisation. The Chair reminded the group that we await confirmation of GM governance arrangements prior to being able to address some of the issues raised, but that GMMMG priorities had been taken from national and GM agreed priority areas and progress shouldn't be delayed on these work streams.

AW gave an update on the progress of the subgroup terms of reference, and on the recent meeting of the high cost drug panel, and submission of a GM policy to the elective care reform board.

3.0 Subgroup decisions for ratification

The group was reminded that whilst GMMMG awaits confirmation of its delegated authority following the introduction of the ICB, that all its recommendations will be submitted to the newly formed Clinical Effectiveness and Governance Committee (CEGC) due to meet in September.

GMMMG considered for approval the recommendations from the Clinical Reference Subgroup. It was noted that TA791 Romosozumab for treating severe osteoporosis, was expected to pose a significant financial impact to the GM system, with possible implications for rheumatology services around their capacity to initiate treatment. Further information had been requested by CRG, but GMMMG was asked to approve it for formulary addition pending the pathway from the GM rheumatology network. Finance representation asked that further efforts be made to detail the financial impact of NICE decisions beyond the cost of treatment, detailing the benefits anticipated to the system as well as the cost.

The group requested further information regarding the funding route for Sleepio to treat insomnia and insomnia symptoms as per NICE MTG70. GMMMG will look to consider non-pharmacological interventions ahead of pharmacological where there is evidence to support their use, which is why CRG had considered this technology. Prescribers on the group were receiving requests for this technology but there was a lack of clarity on how this would be funded, and the inequity this could bring if prescribers could only recommend this intervention to patients to self-fund. GMMMG acknowledged that ensuring equitable access to Sleepio and other non-pharmacological interventions, outwith the context of a treatment pathway, may be outside its

terms of reference and agreed that a reasonable step would be for the RDTC to seek further clarity on funding mechanisms and create links with social prescribing functions in GM and return this to GMMMG.

Actions: MM to submit GMMMG decisions to CEGC and seek a prompt decision in order that the GMMMG formulary can be updated in a timely manner. RDTC to seek clarity on funding routes for non-pharmacological technologies.

4.0 Inclisiran Prescriber Information Leaflet

GMMMG were asked to approve for use, information to support primary care prescribers in the prescribing of inclisiran. Inclisiran was added to the formulary as a green drug earlier in November 2021 in line with NICE TA733. It was explained that a series of task and finish groups to support implementation of the NICE TA for inclisiran was held by Health Innovation Manchester during July and August, which had helped to shape this information.

Prof Handrean Soran returned to GMMMG to support this discussion, and the group discussed some suggested amendments. Dr Pete Budden as chair of clinical reference subgroup, who had led on the development of this leaflet, supported this discussion and views were heard from clinicians of this committee. The group were reminded that the purpose of this leaflet was to support primary care colleagues in the prescribing of Inclisiran in line with NICE guidance, but that where more detailed advice was required regarding an individual patient the specialist opinion should be sought.

It was agreed that the comments made be considered by the authors, and the leaflet circulated around this membership for virtual approval.

Action: Authors to make any relevant amendments and resubmit this leaflet for GMMMG approval by email in the coming week prior to the submission of GMMMG decisions to CEGC for ratification.

5.0 AOB

Nil

Date of next virtual meeting: Thursday 13th October 2022, 1 – 3pm