

Enclosure No:	1/AWMSG/0724
Agenda Item No:	1 – Minutes of previous meeting
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All Wales Medicines Strategy Group (AWMSG)

**Draft minutes of the AWMSG meeting held
at 9:30 am on Tuesday, 11 June 2024 at
the All Nations Centre, Sachville Avenue, Cardiff, CF14 3NY**

Voting members present:

**Did not
participate
in
agenda
item:**

- | | | |
|------------|------------------------------|---|
| 1. | Prof Iolo Doull | Chairman |
| 2. | Prof Stephen Monaghan | Consultant in Public Health Medicine |
| 3. | Mrs Eleri Schiavone | NHS Wales Joint Commissioning
Committee |
| 4. | Prof Dyfrig Hughes | Health Economist |
| 5. | Ms Kate Parrish | ABPI (Wales) |
| 6. | Mrs Claire James | Lay Representative |
| 7. | Mrs Pam James | Lay Representative |
| 8. | Mr Dylan Jones | Community Pharmacist |
| 9. | Dr Jeremy Black | GP with prescribing lead role |
| 10. | Ms Rafia Jamil | Senior Primary Care Pharmacist |
| 11. | Mr Hywel Pullen | Director of Finance |
| 12. | Mr David Fox | Senior Hospital Pharmacist |
| 13. | Mrs Katherine White | Senior Nurse |
| 14. | Ms Cathy Wynne | Other healthcare professions eligible
to prescribe |
| 15. | Mr Jonathan Simms | Chief Pharmacist |

Welsh Government:

Mr Andrew Evans

Medicines value unit:

Mr Mark Francis

AWTTC staff:

Mrs Helen Adams, Senior Pharmacist

Ms Shaila Ahmed, Advanced Pharmacist

Mr Richard Boldero, Senior Pharmacist

Dr Andrew Champion, Programme Director

Dr Katherine Chaplin, Senior Scientist

Dr Clare Elliott, Senior Scientist

Dr Stephanie Francis, Principal Scientist

Dr Carolyn Hughes, Medical Writer

Mr Anthony Williams, Head of PAMS

Mrs Claire Thomas, Head of WAPSU and Medicines Optimisation

List of abbreviations:

ABPI	Association of the British Pharmaceutical Industry
AWMSG	All Wales Medicines Strategy Group
AWPAG	All Wales Prescribing Advisory Group
AWTTC	All Wales Therapeutics and Toxicology Centre
IR	Independent review
WHSSC	Welsh Health Specialised Services Committee
OWMAG	One Wales Medicines Access Group
NPIs	National Prescribing Indicators

1. Welcome and introduction

The Chair opened the meeting, welcomed members and observers and confirmed the meeting is quorate.

2. Apologies:

Dr Sam Cox, Hospital Consultant

Dr Richard Skone, Medical Director

Dr Alison Thomas, Clinical Pharmacologist

3. Declarations of interest:

The Chair invited declarations of interest. There were none.

4. Minutes of previous meeting

The draft minutes of the previous meeting held on 14 May 2024 were checked for accuracy and approved. There were no matters arising.

5. Chairman's report (verbal update)

The Chair confirmed receipt of ratification by Welsh Government of AWMSG's advice for opicapone and alglucosidase alfa, and the One Wales decisions for infliximab, ustekinumab and vedolizumab. All advice has been published on the AWTTC website and disseminated to the service.

The Chair informed members that the One Wales Medicines Assessment Group held a virtual consultation in May 2024 to review One Wales advice for

rituximab for the treatment of myasthenia gravis in adults. AWMSG members noted the decision of OWMAG is to continue to support use over the coming year, with a review to take place one year after the decision.

The Chair announced the date of the Annual Best Practice Day on Tuesday 2 July in Cardiff and said that registration is open for those who wish to learn more about prescribing initiatives that have had a positive impact locally. The event provides opportunity to learn from each other and network.

The Chair informed attendees that he, and several AWTTTC staff, will be attending the HTAi 2024 Annual Meeting from 15–19 June in Seville, Spain. AWTTTC staff will be presenting 3 posters at the conference.

The Chair reported that AWTTTC hosted the Annual IPFR Training Workshop at Cardiff City Stadium on 16 May. He mentioned that workshop delegates watched an interview with a patient from Pembrokeshire who was treated with dostarlimab for bowel cancer. She talks about her experiences openly and the interview was insightful. This short video is available to watch on the AWTTTC website. Wales was the first UK nation to approve access to dostarlimab through the One Wales medicines process. The Chair was pleased to be able to report such a positive outcome.

The Chair reported that a Learning at Lunch therapeutic update session was held on 20 May, and a virtual meeting of the Patient & Public Involvement Group (PAPIG) was held on 21 May and went well. The presentations from both of these events are available on the AWTTTC website.

The Chair explained that after the publication of the new AWMSG Medicines Strategy, he is arranging meetings with partners to explore how AWMSG can work with them to deliver the aims and objectives set out in the document.

The Chair passed on his apologies for the next AWMSG meeting on Tuesday 9 July. He confirmed that Dyfrig Hughes will take on the role of Chair for this meeting.

6. AWMSG Medicines Assessment Process for Licensed and Off-label Medicines

Dr Stephanie Francis provided an update on this paper since it was presented previously, and outlined the changes made to the document following consultation.

It was noted the consultation comments were generally very positive. The main changes to the paper after consultation were:

- to provide clarity around the Scrutiny Panel decision-making process (Section 2.1)
- to replace the term “unlicensed” by “off-label”
- to refer to the Medicines Value Unit and the fact that they will be involved early in the process (Section 3.2)
- to provide clarity around the HTA and limited assessment routes (Appendix 2).

The Chair invited comments on the paper. The ABPI representative said that ABPI are content with it. Members discussed the importance of collecting outcome data and how it could best be collected. Discussion focussed on the use of the Blueteq high cost drugs system and the requirement to mandate its use and how the health boards collect and provide data; collecting self-reported patient data; the level of anonymity of patient data and ensuring secure access to data; linking with existing data systems; agreement on what data to collect and ensuring the data would be useful; documenting a clear process for collecting data; collecting disease-specific measures and using questionnaires such as the EQ5D.

The lay member asked about the time frame of the new process. Mrs Adams agreed to add timelines to the schematic diagram, and clarified that the assessment process would align to the current timelines of 4–6 months.

Attention was drawn to the Scrutiny Panel Constitution and there were no issues of note. The lay member commented that she was pleased to see the inclusion of lay representation.

It was noted that AWTTTC's equality and health impact assessment (EqHIA) should record the negative impact on patients of a medicine receiving a non-recommendation, and the impact of a positive recommendation on the population of Wales in terms of opportunity cost.

AWMSG endorsed the paper.

Dr Francis said that the next steps, after endorsement of the paper, and endorsement of the AWMSG Scrutiny Panel constitution by AWMSG, would be for AWTTTC to update the website and launch the updated process in September/October, and convene the Scrutiny Panel. Dr Francis and Dr Champion said that they had received interest to join the Scrutiny Panel and they will feed back on progress with setting up the panel.

7. Supporting timely access to AWMSG and NICE approved medicines in Wales

Dr Stephanie Francis introduced a paper on the implementation of medicines advice in Wales. This outlined the current roles of AWTTTC and AWMSG in supporting medicines access, and highlighted the potential extended role for AWTTTC in highlighting implementation problems at an early stage. Dr Francis explained the background to the paper, and members discussed the lessons learned from that experience.

Members discussed the 60-day period given for health boards in Wales to implement AWMSG and NICE advice and make a medicine available for prescribing, and how problems with implementation could be identified. They considered the importance of managing patients' expectations, early engagement and having conversations about commercial arrangements with medicines suppliers earlier in the assessment process. It was noted that health boards are responsible for reporting implementation problems to

Welsh Government. A number of factors were considered which may highlight potential issues with implementation, these include; collecting data that would highlight implementation problems, working with clinical networks in Wales, insufficient information for implementation costs in the medicines assessment process and getting more information about costs and service implications.

Dr Francis and Mrs Adams said that AWTTTC will be looking to see how it could support health boards with implementation. Members agreed that implementation over 60 days should be an exception and not the rule. It was suggested that AWTTTC could identify national implementation problems.

AWMSG endorsed the paper.

8. National Prescribing Indicators 2023–2024: Analysis of Prescribing Data to December 2023

Appendix: A focus on tramadol

Ms Shaila Ahmed and Mr Richard Boldero presented an overview of the quarterly report on the National Prescribing indicators and highlighted changes. Dr Katherine Chaplin presented an overview on tramadol prescribing in Wales based on data from SPIRA.

Members said they liked the more detailed focus on tramadol prescribing. They discussed the variability between GP clusters and health boards, and considered what other factors could be explored that might explain that variation. They considered the limitations of the available data; showing prescribing for analgesia in general (exploring pregabalin and gabapentin, prescribing across Wales); finding out what health boards in Wales are focusing on; and better engagement with Chief Pharmacists.

9. NHS Wales inhaler carbon footprint report – February 2024

Mr Richard Boldero presented an overview of the inhaler carbon footprint report, where the data continues to show a positive change, although progress possibly appears to be slowing. He also reported that the Inhaler Task & Finish Group has been restructured and will be supported by four smaller sub-groups which have been proposed as: Prescribing; Communications and Engagement; Inhaler disposal; and Four Nations.

10. Any other business

There was no other business.

The Chair confirmed the date of the next meeting on Tuesday 9 July 2024
Venue: The All Nations Centre, Cardiff