

Grŵp Strategaeth Meddyginiaethau Cymru Gyfan
All Wales Medicines Strategy Group



Annual Report: 2025-2026

*Clinical, scientific, analytical and administrative
support provided by the All Wales Therapeutics
and Toxicology Centre*



AWTTC

Canolfan Therapiwteg a Thocsicoleg Cymru Gyfan
All Wales Therapeutics & Toxicology Centre



*This document is available in Welsh
Mae'r ddogfen hon ar gael yn Gymraeg*

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Foreword

Chair's welcome

It is a pleasure to introduce the All Wales Medicines Strategy Group (AWMSG) Annual Report for 2025–2026. This report describes how, working closely with the All Wales Therapeutics and Toxicology Centre (AWTTC) and our partners across Wales, we have continued to support equitable access to clinically and cost effective medicines, promote safer use of medicines, and help the NHS achieve the best outcomes for patients. Over the past year, AWMSG has continued to provide 'once for Wales' advice to the Welsh Government, underpinned by transparent and robust assessment processes. We have also strengthened the way we work with the people who rely on our advice and guidance: patients and the public, healthcare professionals, and the pharmaceutical industry. Their involvement helps ensure that our work reflects lived experience, clinical reality, and the practicalities of implementation – so that decisions made nationally translate into real benefits locally.

This annual report highlights activity across the breadth of our programme, including work to support medicines optimisation,

improve medicines-related safety, and enable timely implementation of new treatments. It also reflects the wider context in which we operate – rising demand, increasing therapeutic complexity, and the continued need to demonstrate value – making it more important than ever that we use evidence, collaboration and shared priorities to guide decisions.

I would like to thank AWMSG members and subgroups for their expertise and commitment, and the AWTTC teams who provide the clinical, scientific, analytical and administrative support that makes our work possible. I am also grateful to colleagues across NHS Wales, the Welsh Government, and our many partner organisations for their contributions, challenge and collaboration throughout the year.

As we look ahead, AWMSG remains committed to supporting a fair, sustainable and patient-centred approach to medicines in Wales. We will continue to listen, learn and work in partnership to improve outcomes and reduce unwarranted variation, so that people across Wales can

benefit from the right medicine at the right time. I hope you find this report informative and I encourage you to engage with our work as it develops over the coming year.



Professor Iolo Doull
Chair
AWMSG

AWTTC Directors' summary

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The people of Wales rightly expect timely access to safe, clinically effective and cost-effective medications. AWTTC supports AWMSG by providing a scientific, technical, and administrative secretariat to AWMSG and its associated subcommittees. We work closely with AWMSG members to ensure the Welsh Government and NHS Wales have high quality intelligence, reviewed by independent experts, to aid their decision making.

This last year, AWTTC has welcomed several new colleagues, who have enhanced our capabilities. We are joined by two All Wales Consultant Pharmacist colleagues, who bring deep subject matter expertise in pharmacogenomics and community healthcare. The incorporation of the Welsh Medicines Advisory Service (WMAS) within AWTTC greatly enhances our ability to deliver a wider range of services for the NHS and patients in Wales.

AWTTC benefitted from the Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG) Investment Programme by enhancing our capabilities in horizon scanning, medicines assessment, data analysis and supporting

implementation. Funding has been secured until 2028–2029 to meet key objectives that will drive innovation in the delivery of health technology assessments, support implementation and improve data collection and analytics. Achieving this will allow us the resolution to measure effects of changes and plan further adjustments to optimise the impact of medicines in Wales.

Our expertise is founded on our research excellence. We collaborate closely with our academic and health service colleagues to explore clinically relevant topics and develop our in-house capabilities. This year we have published four peer-reviewed articles in the clinical and scientific literature, presented at international conferences and delivered invited presentations across the UK.

We will continue to apply our professional expertise and to develop our reputation in data analytics to support AWMSG and NHS colleagues in delivering world-class medicines access and medicines optimisation to the people of Wales. Finally, we would like to thank all the fantastic staff at AWTTC for their determination, vision and expertise for delivering such a high-quality work programme over the last 12 months.



Professor James Coulson
Clinical Director
AWTTC

J. Coulson



Dr Andrew Champion
Programme Director
AWTTC

A. R. Champion



Medicines have the potential to be truly transformative. The right medicine, used in the right way can improve the quality and in some cases increase the duration, of people's lives. Creating an environment in which people have prompt and equitable access to medicines which meet their health needs also encourages industry to invest in research with our universities and in clinical trials with our health boards and trusts. In doing so people in Wales are afforded earlier access to new and innovative medicines and investment supports growth in our economy. For these reasons ensuring patients in Wales have access to efficacious medicines which are of proven value to the NHS, remains a priority for the Welsh Government.

This year's annual report highlights the very good work the All Wales Medicines Strategy Group (AWMSG), supported by the All Wales Therapeutics and Toxicology Centre (AWTTC), has done to promote ready access to innovative medicines, to ensure the appropriate and safe use of all medicines, and to maximise the value the NHS and Wales as a whole secures from its considerable investment.

In the past year, AWMSG and AWTTC have continued to provide robust, evidence-based advice underpinning our 'once for Wales' approach which remains central to ensuring that patients in all parts of Wales have timely and consistent access to clinically effective and cost-effective treatment. Despite increasing demand, rising therapeutic complexity and the challenging financial outlook, NHS organisations continue to make progress against each of the four ambitions and the eight goals described in AWMSG's Strategy for Wales 2024–2029.

The demonstrable improvement of all health boards against national prescribing indicators is evidence of the effectiveness of the advice, tools and resources AWMSG has produced in the last and in previous years. Importantly whilst the trend of improvement has continued, it has been pleasing to see AWMSG place an increasing focus not only on improvement at the all Wales level but also on how improvement varies between different communities within Wales. Identifying, challenging and reducing the variation in performance between and within health boards must be a priority for AWMSG in the future, and I look forward to

supporting the Chair and members to expand and develop their role on behalf of the Welsh Ministers, in holding the NHS to account for meaningful improvements in the access to, use of and value derived from medicines for every citizen in Wales.

Finally, I would like to express my sincere thanks to the Chair and members of AWMSG, and to the officers of AWTTC, for the invaluable contribution they make to support innovation, ensure safety and maximise the positive outcomes medicines can bring to the health and wellbeing of the people of Wales.

Andrew Evans OBE FRCPharm
Chief Pharmaceutical Officer
Welsh Government



Llywodraeth Cymru
Welsh Government

About us

Profile of AWMSG

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Our vision for Wales – “To improve the health and well-being of people in Wales by enabling patients to get the best outcomes from their medicines”

Name: All Wales Medicines Strategy Group (AWMSG)

Chair: Professor Iolo Doull

Established: 2002

Role: To advise the Welsh Government on strategic developments in prescribing as outlined in the [AWMSG Strategy for Wales: 2024–2029](#).

Members: Includes doctors, nurses, pharmacists and other healthcare workers who can prescribe medicines, academics, health economists, a pharmaceutical industry representative, lay members and an NHS Director of Finance. See [Our Committees](#) on the AWTTC website for lists of individual members.

Advisory groups and subgroups:

- All Wales Prescribing Advisory Group (AWPAG)
- AWMSG Scrutiny Panel
- AWMSG Steering Committee
- Licensed One Wales Medicines

Assessment Group (LOWMAG)

- One Wales Medicines Assessment Group (OWMAG)
- Commercial Arrangement Scheme Wales Group (CASWG)

For more information see [Our Committees](#) on the AWTTC website.

Organisational: The AWMSG Steering Committee oversees and guides strategic initiatives, and the All Wales Therapeutics and Toxicology Centre (AWTTC) provides clinical, scientific, analytical and administrative support.

Meetings: 10 meetings were held in 2025–2026. Meetings are open to the public. The [minutes of previous meetings and dates of future ones](#) are on the AWTTC website.

More information:

[awttc.nhs.wales](#) (English website)
[cttcg.gig.cymru](#) (Welsh website)
[@AWTTCcomms](#) (English X account)
[@AWTTCcymraeg](#) (Welsh X account)
[LinkedIn](#) (English and Welsh)

2025–2026 in numbers



10 AWMSG meetings



10 Recommendations



4 licensed medicines



6 off-label medicines



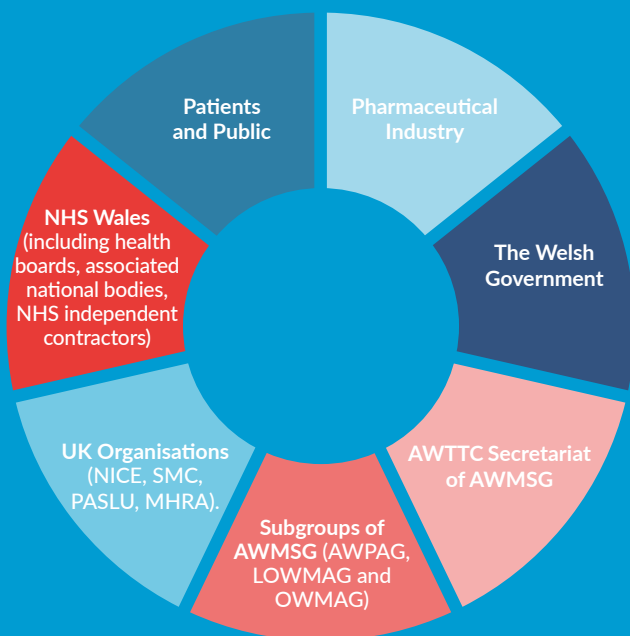
9 medicines optimisation publications



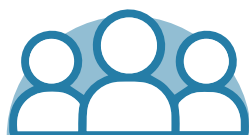
16 National Prescribing Indicators monitored

Our partners and how they get involved

We work with patients and the public, healthcare professionals and representatives of the pharmaceutical industry, as well as the Welsh Government and relevant UK organisations, to issue recommendations on medicines and guidance on optimising medicines use.



Our three key partners are: patients and the public; healthcare professionals; and the pharmaceutical industry. They are embedded into all aspects of our work and play a vital role in achieving our shared goals. There are many ways in which they can get involved in our work. Here are some examples.



Patients and the public

- During our assessment of medicines, [we ask patients and the public for their views](#) about what it's like to live with their health condition and about any medicines they are, or were, taking for it. We consider these views when we make our recommendation to the Welsh Government. [Medicine assessments currently in progress](#) are listed on the AWTTC website.
- We produce resources to support the safe and best use of medicines in NHS

Wales. We ask patients and the public to [comment on every medicine resource](#) produced. We consider and address every response before the resource is finalised, endorsed and published. Current [open consultations](#) are listed on the AWTTC website.

- [Our lay members](#) are members of the general public and are full voting members. They give an independent view and highlight what matters to patients, and their families and carers, to help inform decisions about new medicines and medicines resources.
- [Patient and Public Interest Group \(PAPIG\) meetings](#) are held four times a year and are supported by AWTTC. They are an opportunity for patients and the public to hear about our work, and find out how they can [get involved](#).



Healthcare professionals

- Our committee members bring together a wide variety of specialist knowledge, including those working in a range of healthcare professions across all areas of Wales. We encourage healthcare professionals to [contact us](#) if they are interested in [becoming a committee member](#).
- Healthcare professionals working in Wales can [propose a medicines optimisation resource](#) to be considered through our endorsement process, which includes open consultation via the AWTTTC website.
- Healthcare professionals are also invited to identify when an AWMSG assessment is required for a medicine. They may complete a [medicines request form for healthcare professionals](#) or email AWTTTC at awtttc@wales.nhs.uk.
- Any healthcare professional working with patients could have a significant role in [providing expert advice](#) to us. For example, we ask clinical experts to contribute to the AWMSG medicines assessment process, and to attend the Licensed One Wales Medicines Assessment Group (LOWMAG) and the One Wales Medicines Assessment Group (OWMAG) meetings to contribute to discussions. We also ask healthcare professionals to comment on the prescribing guidance and medicines optimisation resources we produce. The [AWMSG assessment work plan](#) and the current [open consultations](#) are listed on the AWTTTC website.
- AWTTTC host [Best Practice Days](#) in which healthcare professionals share best practice initiatives related to medicines optimisation. AWTTTC also host [Learning at Lunch](#) sessions – a series of one-hour online events covering therapeutic areas, national prescribing news and updates in clinical practice.





Pharmaceutical industry

- AWTTTC's Industry Forum gives an opportunity for representatives from the pharmaceutical industry to meet regularly with AWTTTC to talk about issues relating to medicines access in Wales.
- AWTTTC's [horizon scanning](#) team gathers information on new medicines, indications (the conditions they treat) and new formulations in the pharmaceutical pipeline. [UK PharmaScan](#) is the team's primary source of information and we encourage all companies to engage with UK PharmaScan.
- The [Commercial Medicines Access Team](#) support and monitor the implementation of medicines recommended by AWMSG or the National Institute for Health and Care Excellence (NICE) when the medicine is associated with a commercial

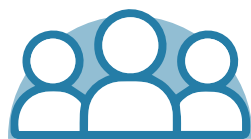


arrangement with NHS Wales. Early engagement from the pharmaceutical industry enables the team to make sure that patients have timely access to medicines and that NHS Wales gets value for money.

- Companies are encouraged to get in touch as early as possible to tell us about pipeline medicines and share information to support with planning and implementation of medicines on the NICE work programme. In the absence of NICE guidance, companies can [submit a medicine for consideration by the AWMSG Scrutiny Panel](#). The AWMSG Scrutiny Panel will decide if a medicine meets the AWMSG criteria for assessment by LOWMAG or OWMAG.
- Pharmaceutical companies can take part in consultations for any medicines optimisation resources that are in development. Every response is considered before the resource is finalised, endorsed and published. Current [open consultations](#) are listed on the AWTTTC website.

What we have achieved together

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**Patients and
the public**



4 PAPIG
meetings



17 speakers



85 attendees



**13 medicines-related
topics covered in depth**



10 medicines
assessments



9 submissions from
patient organisations



9 medicines
optimisation
consultations



20 responses from
patients and the public



**Pharmaceutical
industry**



3 AWTTC Industry
Forum meetings



9 medicines optimisation
consultations shared
with industry

What we have achieved together



Healthcare professionals

Healthcare professionals on our committees

17 14 16 30

AWMSG LOWMAG OWMAG AWPAG



4 Learning at Lunch webinars + 1 podcast



556 attendees



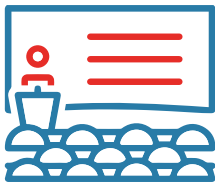
13 topics covered



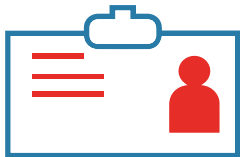
742 online views



9 medicines optimisation consultations 84 responses from healthcare professionals



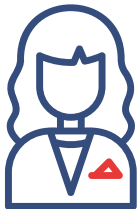
1 Best Practice Day



150 attendees

14

clinical experts involved in medicines assessments



17 clinical experts



14 expert groups

involved in developing medicines optimisation resources

The [AWTTC website](#) and social media are important ways we communicate with our partners; spreading the word about what we do.



779k file
downloads



739k separate
users



563k page views



11.2k X
post views



392 LinkedIn
followers

On our behalf, AWTTC organise and take part in key events to educate, exchange ideas, hear about personal experiences, network and spread awareness about what we do. Some events from the past year are listed below.

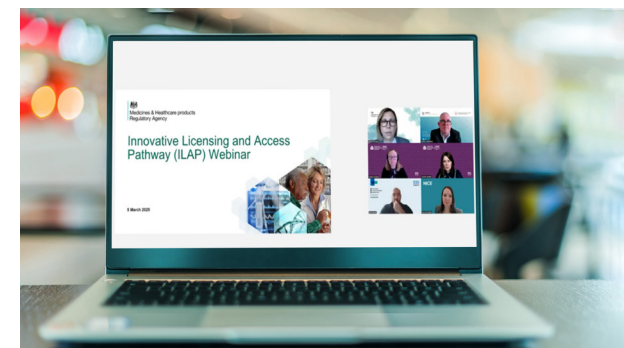


Events from April 2025
to March 2026

April 2025

- [AWTTC presented three posters at the 19th Medical Chemical Defense Conference in Germany](#). Professor James Coulson, AWTTC Clinical Director, presented research into 1) exposure to hydrofluoric acid in the workplace; 2) pralidoxime use as an antidote for organophosphate poisoning; and 3) a review of anthrax enquiries to the UK National Poisons Information Service.
- In preparation for the launch of the refreshed Innovative Licensing and Access Pathway (ILAP), the Medicines and Healthcare products Regulatory Agency (MHRA) hosted a webinar to

introduce the pathway and highlight key improvements. [Dr Andrew Champion, AWTTC Programme Director, was among the key speakers](#) joining other ILAP partners from the National Institute for Health and Care Excellence (NICE), Scottish Medicines Consortium (SMC), NHS England (NHSE) and MHRA.



May 2025

- Senior Scientist Dr Clare Elliott, lead for the Patient and Public Interest Group (PAPIG), and Senior Pharmacist Sabrina Rind recently returned to the Rookwood Sound studio to join presenter Wesley Pritchard. Together, they highlighted the vital work being carried out by [PAPIG](#) in representing patient and public voices.



- AWTTC hosted the first [Learning at Lunch](#) session of the year. As well as covering a range of therapeutic updates, the 1-hour session covered propranolol poisoning and a look at the national Quality Improvement Programme for chronic kidney disease. The session was watched live by a record 162 people.



- [AWTTC staff gave one talk and presented six posters at the 45th Congress of the European Association of Poisons Centres and Clinical Toxicologists \(EAPCCT\)](#). Topics included: a review of hemlock plant ingestions; recreational abuse of ibotenic acid and muscimol-containing mushrooms; intentional overdoses in children; poisoning in children after exposure to insecticides; survival after ingestion of several medications including cenobamate; glycerol toxicity; and exposures to caterpillars.

June 2025

- [AWTTC was recognised at the Antibiotic Guardian Awards 2025](#). The campaign celebrated outstanding contributions from around the world in tackling antimicrobial resistance (AMR). The event provided a platform to share learning and showcase innovative efforts aimed at reducing unnecessary antibiotic use. AWTTC was proud to be shortlisted for two projects, reflecting our commitment to improving antibiotic stewardship in Wales.



- At the first Patient and Public Interest Group (PAPIG) meeting of the year AWTTC pharmacists provided an update on the latest AWTTC news, including its proposed new statement on the values and behaviours of the organisation. Other presentations focused on the length of repeat prescriptions from the ICF Centre of Behaviour Change and public messaging about antimicrobial resistance from Public Health Wales. Watch recordings of past sessions and details of future meetings [here](#).

July 2025

- [Over 150 healthcare professionals from across Wales attended the annual Best Practice Day](#) hosted by AWTTC and the Yellow Card Centre Wales. This

year's event focused on the theme of Medicines Safety and featured a packed programme of expert speakers, a poster competition, and breakout sessions, all aimed at improving prescribing practice across NHS Wales. Feedback from the day was overwhelmingly positive, with delegates praising the quality of speakers and the informative and insightful sessions.

"Today has been brilliant and we need more sessions like these. I will be back next year."



- Another popular one-hour online Learning at Lunch session was held in July covering a variety of topics including

decarbonisation of medical gases – nitrous oxide project, a review of the AWMSG medicines assessment process and a range of therapeutic updates. Watch recordings of past sessions and find details of future events [here](#).

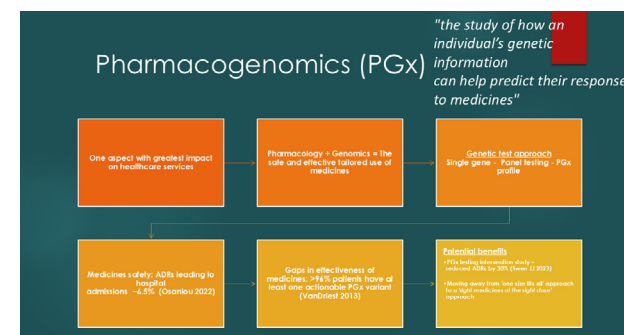


August 2025

- A special one-off pre-recorded Learning at Lunch session was released in August to support prescribers when dispensing anti-viral medication for the treatment of COVID-19. The session was presented by Rhys Oakley, Consultant Pharmacist, Infectious Diseases and the recording can be viewed [here](#).

September 2025

- [PAPIG met in September](#) with presentations and open discussions exploring pharmacogenomics and precision medicines in Wales, prioritising the voices of people with lived experience in rare disease research, and weight-loss injections and pregnancy.



October 2025

- The Learning at Lunch team presented a session focusing on a greener primary care, and the menopause and prescribing intervals. A rapid update on therapeutic news was also provided. Watch this and previous sessions, and find details of future events [here](#).

November 2025

- AWTTC is delighted to have been awarded first place for best poster presentation at this year's Royal Pharmaceutical Society (RPS) Annual Conference. The poster 'Developing the 2025–2028 National Prescribing Indicators for NHS Wales: A Stakeholder-Led Approach', was presented by Shaila Ahmed, Senior Pharmacist at AWTTC.



- AWTTC launched their set of values and behaviours. These core organisational values are the set of ethics and principles that guide the organisation's decision-making and processes. They also serve

as the foundation for the organisational culture, and the behaviours expected of its employees.



December 2025

- December's [PAPIG](#) meeting was well attended with presentations focusing on three areas: taking your own medicines in hospital - balancing independence with staff support; learning to prescribe - putting trainees in the driving seat; and how to present directions on medicine labels for patient safety.

January 2026

- AWTTC announced that [a dedicated list of Blueteq forms](#) available for use across NHS Wales is now live on the AWTTC website. This marks an important step in supporting health boards, trusts and clinicians to implement the Blueteq

High Cost Drug (HCD) system. [The list](#) will be updated as additional forms are approved and made available.

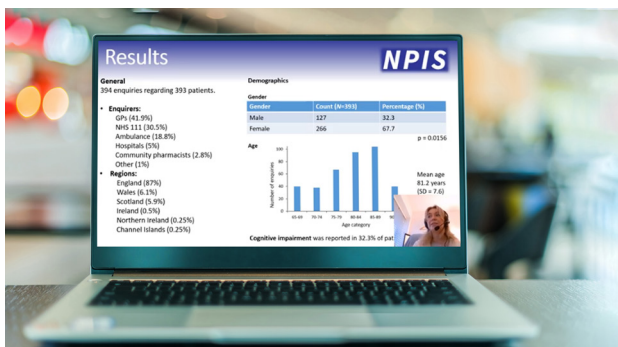
February 2026

- AWTTC join the Annual Reception in Cardiff Bay to celebrate [International Rare Disease Day](#). AWMSG and AWTTC work to ensure that people with a rare disease living in Wales have the same opportunity to access medicines as other patients, and this event gave the team a chance to raise awareness and champion the rare disease community.



- At the last [Learning at Lunch](#) session of the year, Respiratory Consultant Dr Katie Pink gave an update on the All Wales Adult Asthma Guidelines, and staff from the Cardiff National Poisons Information Service presented their research findings on safety risks associated with the use of monitored dosage systems in older people. Dr Tessa Lewis, Medical Advisor to AWTTC, also gave an update on relevant therapeutic news.

“Excellent short sharp session, fitted in large amount of information/updates in a short time. More please!”



March 2026

- The Spring PAPIG meeting was another great success, with strong attendance and meaningful discussion throughout. Presentations included patient information on polypharmacy, a national process for supporting the introduction of complex therapies in Wales, and antibiotic posters and information leaflets for patients. Watch recordings of past sessions and details of future meetings [here](#).
- The [AWTTC Work Programme 2025–2028](#), which went live this month following its initial rollout in April 2025, outlines strategic objectives aimed at enhancing medicine access, optimisation, and data utilisation in Wales. The programme brings together priorities identified with our partner organisations, work being delivered as part of the [Voluntary Scheme for Branded Medicines Pricing, Access and Growth \(VPAG\) Investment Programme](#), and many of the goals identified in the [AWMSG Strategy for Wales: 2024–2029](#).

Objective	Impacted by VPAG?	Intended outcome
Horizon scanning and financial forecasting		
1. Undertake a mapping exercise across Wales to determine the current horizon scanning/financial forecasting landscape, identify any gaps, duplications and barriers, and scope potential solution.	✓	Understand the requirements of stakeholders to inform the development of an enhanced horizon scanning and financial forecasting service for Wales.
2. Develop an action plan based on the results of the mapping exercise to support development of the national horizon scanning and financial forecasting service for Wales.	✓	The key tasks required to support the development of the horizon scanning and financial forecasting processes will be defined and prioritised.
3. Develop horizon scanning and financial forecasting methods, processes, outputs and reporting mechanisms.	✓	Reporting using the AWTTC medicines access database will be developed and refined so that all stakeholders are provided with sufficient horizon scanning and financial forecasting information. This will assist health boards and trusts with service and budget planning and provide information on a 'Once for Wales' basis.
4. Monitor pipeline medicines.		To support service planning and financial forecasting, enabling the NHS in Wales to be better prepared and provide timely access to clinically and cost-effective medicines.
Medicines access		
5. Develop processes and new systems to address current gaps in access for Wales outside of NICE Technology Appraisal guidelines.	✓	People in Wales have timely access to medicines where there is a current clinical need (right people, right time, right medicines).
6. Input into national collaboration on medicines access.	✓	Align processes and systems and identify areas for collaboration to improve efficiency, reduce duplication and deliver reduced cost-based advice.
7. Deliver medicines assessments.	✓	People in Wales have timely access to medicines where there is a current clinical need.

* VPAG – Voluntary Scheme for Branded Medicines Pricing, Access, and Growth. Find out more here: [VPAG \(Wales\) Investment Programme – AWTTC.ch.wales](#)

Objective	Impacted by VPAG?	Intended outcome
Implementation of medicines		
8. Enhance the processes and mechanisms managed by the Commercial Medicines Access Team (CMAT) to ensure that there are robust processes in place to facilitate timely access to medicines associated with a commercial arrangement. To ensure health boards and trusts in Wales can access and receive the maximum possible value for money for NICE and AWMSC approved medicines.	✓	Ensure the NHS in Wales gets the medicines for the right price so that the right people receive clinically and cost-effective treatments at the right time.
9. Implement the Blasting High-Cost Drugs (HCD) system to enhance clinical and financial governance of high-cost medicines, providing health boards and trusts in NHS Wales with a standardised process to reduce variation in access to medicines and improve access to data.	✓	Better governance and monitoring of high cost drug usage across Wales, reducing variation in prescribing across health boards and trusts and providing data to support clinical decision making, patient safety and commercial access.
10. Develop a process for supporting the planning and introduction of new medicines and monitoring the uptake of high-impact medicines, e.g. national pathways mapping of complex/rare therapies.	✓	Provide an 'All Wales' approach to the planning and introduction of AWMSC and NICE approved medicines, supporting the consistent uptake of medicines likely to have a significant impact on existing services and/or clinical pathways.
11. Supporting access to new treatment fund medicines.	✓	People (patients & health care professionals) have timely and equitable access to clinically and cost-effective medicines.
Data		
12. Collaborate with DfW to access new data sets including those within the National Data Resource (NDR) and the Digital Medicines Transformation Hub (DMTH), which will support, safe, efficient, and effective prescribing for patients and healthcare professionals.	✓	AWTTC collaborates with DfW and other stakeholders in providing meaningful benefits from new datasets.
13. Establish new data sets to enable identification of unmet variation in prescribing.	✓	Prescribing outliers are identified for health board investigation to achieve positive change. These data will include outcomes-world evidence where possible.

* VPAG – Voluntary Scheme for Branded Medicines Pricing, Access, and Growth. Find out more here: [VPAG \(Wales\) Investment Programme – AWTTC.ch.wales](#)

Objective	Impacted by VPAG?	Intended outcome
Medicines optimisation		
14. Utilise existing and new data to support decision making in medicines optimisation.	✓	Datasets are explored by AWTTC to develop beneficial analyses and visualisations and provide insights for stakeholder utilisation.
15. Produce regular and ad hoc data reports.		Stakeholders have access to information when they need it.
16. Maintain data sources and SPRA.		Stakeholders have access to information when they need it and SPRA remains accessible and fit for purpose.
Medicines optimisation		
17. Develop and implement a governance structure and programme of work for Your Medicines, Your Health.		To support the public and HCPs in ensuring that patients in Wales take their medicines in a way that maximises their health outcomes, and that waste associated with medicines use is reduced and sustainability is improved.
18. Review and update the AWTTC Medicines Optimisation Framework.		Processes for how we prioritise our work and develop each of our outputs are more transparent and continue to be fit for purpose.
19. Develop and publish the 2025–2031 set of National Prescribing Indicators.		A new set of NPIs is developed that reflects the priorities of NHS Wales and continues to drive rational prescribing.
20. Deliver medicines optimisation resources.		Stakeholders continue to have access to resources that meet their needs and support optimised prescribing.
Health economics		
21. Establish processes to undertake de novo health economic modelling to support AWTTC outputs.		To provide a transparent, consistent and efficient approach to de novo modelling across the various AWTTC programmes of work.
22. Continue delivering health economic expertise to support value-focused decision making and priorities.		Value and cost-effectiveness continue to be considered in AWTTC outputs aimed at delivering value for NHS Wales.

* VPAG – Voluntary Scheme for Branded Medicines Pricing, Access, and Growth. Find out more here: [VPAG \(Wales\) Investment Programme – AWTTC.ch.wales](#)

Getting the best outcomes from medicines

AWMSG’s five-year strategy for 2024-2029 defines four broad ambitions that members want our strategy to focus on: getting the best outcomes from medicines; enabling access to medicines; medicines-related safety; and optimising value. We’ve used these four ambitions to categorise some notable news stories of the past year.



One of our ambitions is to help people in Wales have the best opportunity to achieve the intended benefits of the medicines they are prescribed, and the patient and their prescriber should be supported in making that a reality. Where appropriate, this should include de-prescribing of medication when risk outweighs the benefit. Over the past year, we have worked with AWTTTC and our partners on a range of projects that have helped to realise this ambition.

All Wales Shared Care Framework and patient information leaflets published

These documents aim to ensure consistency in shared care across Wales in terms of principles, application of developing and reviewing shared care arrangements, and in taking a patient-centred approach to shared care. The [Shared Care Framework](#) applies to shared care agreements between specialist services (including secondary or tertiary care) and primary care, where responsibilities for prescribing and monitoring medicines are formally shared under a defined protocol.

Grip Strategaeth Meddyginiaethau Cymru Gylan
All Wales Medicines Strategy Group

All Wales Shared Care Framework

August 2025

All Wales Medicines Strategy Group
Appendix 3: Decision support flow diagram to determine if a medicine is appropriate for shared care

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All Wales guidance to support integrated medicines management in community settings published

This guidance was developed through collaboration with partners in both health and social care and outlines standards on collaborative governance to support safe and optimised medicines management, for a consistent and reliable approach to [medicines management in community-based settings](#) in Wales. The overarching goal is to ensure that each person receives the highest standard of medicines management tailored to their specific needs.

Grip Strategaeth Meddyginiaethau Cymru Gylan
All Wales Medicines Strategy Group

All Wales Guidance to Support Integrated Medicines Management in Community Settings

October 2025

All Wales guidance to support integrated medicines management in community settings

Table 1. Levels of medicines support and responsibilities

Level	Category	Responsibility	Key points
Level 0	Individuals	Individuals self-administer their medicines independently	No specific support needed for medicines management. Ongoing review is necessary to ensure any changes in the individual's ability to remain independent.
Level 1	Individual	Individuals can make decisions about their medicines but need support to do so (e.g. verbal or written support to support adherence with opening containers).	- Support workers are not able to manage medicines provided individuals have been assessed as capable and have positive attitudes are shown. - Detailed documentation of support to ensure to safeguard support workers from liability. - Align with the Medicines Act 2005, governing activities and reporting decision-making activity.
Level 2	Support worker	Support workers must fully administer medicines for individuals who are unable to do so themselves. Correct storage and preparation of medicines for administration, ensuring the individual's needs are met. Requires comprehensive training and competency assessment for support workers.	- Support workers must fully administer medicines for individuals who are unable to do so themselves. - Correct storage and preparation of medicines for administration, ensuring the individual's needs are met. - Requires comprehensive training and competency assessment for support workers.
Level 3	Support worker	Support workers administer medicines requiring advanced skills or greater complexity.	- Requires advanced training and competency assessment. - Ongoing supervision and support from qualified health professionals to ensure safe and effective medicines administration. - Expectations and responsibilities should be clearly defined, and staff should not undertake activities that are beyond their training and oversight required. (See Section 3. Medicines administration)

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We have an ambition to enable access to the right medicines at the right time for people in Wales. Medicines that are clinically and cost-effective are

required to be made available as an option to every person who needs treatment.

Decisions on the availability of medicines should be made on a 'once for Wales' basis, whenever appropriate, to avoid duplication of effort across the service. During 2025–2026, we worked with AWTTC on a range of projects to help achieve this ambition.

Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG) Investment Programme

AWTTC have had an exciting year with the appointment of 14 new staff to support delivery of the VPAG Investment Health Technology Assessment (HTA) Programme in Wales. Work is currently under way to:

- enhance national [horizon scanning and forecasting](#);
- review and develop [medicines assessment](#) methods and processes to ensure access to clinically needed treatments;

- address data needs to support effective prescribing; and
- facilitate effective clinical and financial [governance of AWMMSG- and NICE-approved medicines](#).

The VPAG Programme Board have played a pivotal role in shaping the programme's objectives and delivery metrics, and we are very proud of the way the work has progressed over the last twelve months. The Programme Board have met three times this year to discuss the progress of the four projects and agree key objectives for 2026.

We are enthusiastic about delivering the next phase of the work and confident that continuous progress will be made across the projects in 2026–2027. You can find more information on the VPAG Investment HTA Programme in Wales on the [AWTTC website](#).

Introducing new medicines in the NHS in the UK

The Department of Health and Social Care, in collaboration with system partners from across the UK, including AWMMSG, produced a [pathway summarising the processes pharmaceutical companies should follow](#)

[when preparing to launch new products in the UK](#). The pathway outlines the routes to market, how regulatory, health technology evaluation and commercial pathways align, and the mechanisms for company engagement including early advice services.

AWTTC launch phase II of the Blueteq High Cost Drugs (HCD)



System

[Blueteq](#) is a web-based software system being implemented in Wales to allow the health boards and trust to monitor the prescribing of high-cost medicines and manage the ever-increasing complexities associated with their use. Phase I was for NHS Wales Joint Commissioning Committee-commissioned medicines only; phase II includes HCDs prescribed by the seven health boards and trust. They will identify their own priority areas for implementation and will continue with a phased approach until all eligible medicines are included.

Enabling access to medicines

19

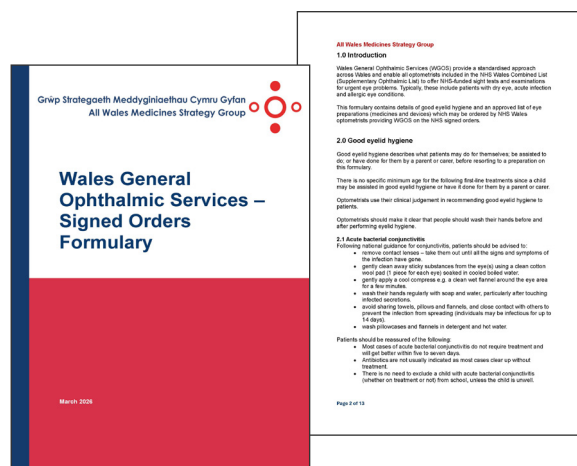
The new Innovative Licensing and Access Pathway (ILAP) welcomes first investigational products

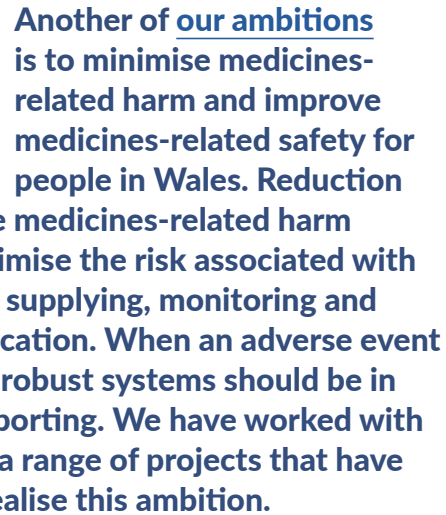
The Medicines and Healthcare products Regulatory Agency (MHRA), on behalf of ILAP Partners including AWTTC, announced that [three potential therapies have become the first to enter a new UK scheme](#) designed to help new medicines reach NHS patients faster. ILAP is the only end-to-end pathway in the world where healthcare developers, the regulator, the UK-wide national health system, and the health technology assessment bodies work together from the outset. By giving developers early, coordinated guidance on safety, effectiveness and value requirements across the system, the scheme reduces the time it takes for new treatments to move through development, licensing and, if approved, to NHS patients.

New Signed Order Formulary for Welsh General Ophthalmic Services published

To support optometrists to manage urgent eye problems such as dry eye, acute infection and allergic eye conditions,

and then order the medicines or devices required for treatment under the NHS using a signed order, [a new All Wales formulary was produced](#). The AWMMSG-endorsed resource provides clinical information on eye preparations, including indications and product types, to support The Wales General Ophthalmic Services (WGOS) optometrists to work safely and consistently within national guidance. It also includes good-practice recommendations to enable optometrists to offer effective advice before writing a signed order.





The purpose of this document is to provide guidance to healthcare professionals when assessing the clinical need and urgency of requests from patients for repeat medication. The guidance is relevant to prescribers in NHS 111 and Out of Hours primary care services. Other professionals such as community pharmacists providing an Emergency Medicine Supply service may also find the clinical guidance useful to ensure safe and effective use of medications. Read more [here](#).

[illegible]

Gŵp Strategaeth Meddygiaethau Cymru Gynfa
All Wales Medicines Strategy Group

All Wales self-administration of medicines framework

March 2020

All Wales self-administration of medicines framework

Figure 1. Self-administration of medicines (SAM) pathway

```

graph TD
    A[Patient admitted to hospital/care unit] --> B[Patient, parent or carer assessed for suitability of self-administration of medication using assessment form.]
    B --> C[Self-administering  
Patient, parent or carer able for self-administration.  
  
Patient, parent or carer provided with information about and signs consent form.  
  
Patient, parent or carer has the digipack code or key.]
    B --> D[Supervised  
Patient, parent or carer suitable for self-administration under close supervision.  
  
Nurse/clinician is responsible for supervising medications being taken and having the digipack code or key.]
    B --> E[Realtime professional administration  
Patient, parent or carer unsuitable for self-administration.  
  
Nurse/clinician is responsible for administering medications and having the digipack code or key.]
    
```

All Wales self-administration of medicines
Appendix 2. Self-administration of medicines ass

Patient name		
Hospital number		
Date of birth		
Or attach patient addressograph.		
Who is being assessed? Please circle:	Parent	
Is the patient, parent or carer happy to self-administer their medicine(s)?	Yes No	
If no, then do not complete this form further. Document the form in the patient's records.		
Assessment criteria	Yes	No
Is the patient, parent or carer responsible for administering their medicine at home?		
Is the patient, parent or carer mentally and physically able to self-administer their medicine(s)? Consider: • frequently changing dosage regimens, • history of misuse of medicines, addiction or self-harm social issues not confused		
Is the patient, parent or carer physically capable of accessing and administering the required medication (eg. are they open to take liquid and blister strips, and can they see their eye drops and/or inhalers)?		
Can the patient, parent or carer read a label?		
Is the patient, parent or carer aware of, and do they have access to, the patient information leaflet(s) that come with their medicine(s)?		
Can the patient, parent or carer open the localised medicines bottles safely?		
Does the patient, parent or carer know:		
What disease to take?		
How to take the medicine?		
Has the patient, parent or carer read and understood the SAM leaflet and signed the consent form?		

If any of the questions have been answered "No", the patient, parent or carer may not be suitable for self-administration. The final decision lies with the healthcare professional undertaking the assessment.

Based on patient, parent or carer knowledge of their medicines and the assessment criteria, indicate the level of supervision recommended.

Re-assess during patient contact, changing levels as appropriate. Record any changes in the patient notes.
Aim to achieve SAM before discharge.

Page 7 of 10

Doc 29 of 33



An ambition of ours is to optimise the value that NHS Wales achieves from its investments in medicines.

Given the limited resources of NHS Wales, all decisions, advice and guidance that we publish should have value considerations at their core. The Welsh Government's 'A Healthier Wales' defines higher value as 'achieving better outcomes and a better experience for people at reduced cost.' We have worked with AWTTTC on a variety of projects to help achieve this ambition.

New AWMSG subcommittee launched to support implementation of commercial arrangements

The Commercial Medicines Access Team (CMAT) is a collaborative multi-organisational team comprised of colleagues from AWTTTC, NHS Wales Shared Services Partnership (NWSSP) and the Medicines Value Unit. The role and responsibility of CMAT is to support and monitor the implementation of AWMSG- and NICE-recommended medicines associated with a commercial arrangement. CMAT

are processing an increasing number of commercial arrangements and to support this work, AWTTTC have established the [Commercial Arrangement Scheme Wales Group \(CASWG\)](#), an AWMSG sub-committee which will provide increased stakeholder involvement, transparency and governance to the approval of commercial arrangements on behalf of NHS Wales.

Policy for the procurement and management of medical gases published

[This policy is aimed at the sustainable procurement, management, administration and disposal of medical gases](#) to achieve decarbonisation and is aligned with the NHS Wales Decarbonisation Strategic Delivery Plan 2021–2030. The policy focuses on nitrous oxide (N₂O) and 50% nitrous oxide and 50% oxygen mix, as these gases have the highest impact due to high global warming potential and high-volume usage. It is designed to improve value through preventing waste, ensuring lean service delivery and utilisation of low carbon alternatives.

New SPIRA dashboard monitoring the use of nitrous oxide published

To support the publication of the medical gases decarbonisation policy, a new [SPIRA dashboard](#) has been launched to help track the progress of reducing the amount of nitrous oxide cylinders being used in manifolds. The reduction of nitrous oxide will help drive down the carbon footprint of NHS Wales from medical gases.



Medicines optimisation

Prescribing guidance and resources

Medicines optimisation focuses on patients and outcomes rather than processes and systems. It aims to support healthcare professionals in advising patients how to get the best outcomes from the medicines they are taking. This may involve stopping some medicines or starting others, to make sure a patient is taking the safest medicine that treats their condition. Healthcare professionals will also advise patients how to keep on taking a treatment. To help patients and prescribers get the best outcomes from medicines, we publish prescribing guidance and resources, as well as reports on prescribing performance.

We published a range of prescribing guidance and resources between April 2025 and March 2026. Publication dates and webpage views (up to the end of March 2026) are given for each.

Urgent requests for repeat medication

Published: Jun '25 Views: >2,100

The AWMSG-endorsed 'Urgent requests for repeat medication: Guidance for healthcare

professionals providing NHS 111 and out-of-hours primary care services' document provides advice for healthcare professionals when assessing the clinical need and urgency of requests from patients for repeat medication. The guidance is relevant to healthcare professionals working as prescribers in NHS 111 and Out of Hours primary care services.

All Wales Shared Care Framework

Published: Aug '25 Views: >3,200

This document aims to ensure consistency in shared care across Wales in terms of principles, application of developing and

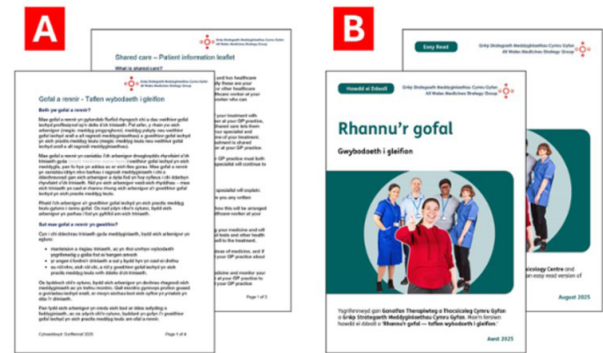
reviewing shared care arrangements, and in taking a patient-centred approach to shared care. The principles of shared care are outlined, and a framework is provided for the seamless sharing of care between the patient, specialist services, and primary care in situations where it is appropriate, beneficial to the patient, and supported by them.

The resource is also supported by patient information leaflets, providing important information for patients to help them in considering their shared care agreements.

All Wales guidance to support integrated medicines management in community settings

Published: Oct '25 Views: >5,500

This guidance was developed through collaboration with partners in both health and social care and outlines standards on collaborative governance to support safe and optimised medicines management, for a consistent and reliable approach to medicines management in community-based settings in Wales. The overarching



goal is to ensure that each person receives the highest standard of medicines management tailored to their specific needs.

[Primary care antimicrobial guidelines – Monographs for treatment and prophylaxis of COVID-19](#)

Published: '25-'26 Views: >18,000

This guideline was developed to provide comprehensive advice on the antimicrobial management of common infections in primary care, taking into account local pathogen and antimicrobial susceptibility data in Wales. Alongside multiple minor updates throughout the year, the guidance received a significant update in July 2025 with the addition of monographs for 'Treatment of COVID-19' and 'Prophylaxis COVID-19'.

[Common Ailments Service monographs for allergic rhinitis and back pain](#)

Published: '25-'26 Views: >34,000

The Common Ailments Service aims to improve patient access to consistent, evidence-based advice for the management

of common ailments. This document includes monographs for the 27 ailments covered by the community pharmacist service. Alongside regular smaller updates to other monographs, new versions of the monographs for 'Back pain (for individuals aged 16 to less than 50 years)' and 'Allergic rhinitis' were published in June and November, respectively.

[Policy for the sustainable procurement, management, administration and disposal of medical gases to achieve decarbonisation](#)

Published: May '25 Views: >800

This document targets the procurement and management of medical gases. This work is aligned with the NHS Wales Decarbonisation Strategic Delivery Plan 2021–2030. While the principles and recommendations could be applied to many medical gases, this policy focuses on nitrous oxide (N₂O) and 50% nitrous oxide and 50% oxygen mix commonly known under the tradename Entonox®, as these gases have the highest impact due to high global warming potential and high-volume usage.

[Welsh General Ophthalmic Services – Signed Order Formulary](#)

Published: Mar '26 Views: >900

The Wales General Ophthalmic Services (WGOS) enable all optometrists included in the NHS Wales Combined List (Supplementary Ophthalmic List) to offer NHS-funded sight tests and examinations for urgent eye problems. Typically, these include patients with dry eye, acute infection and allergic eye conditions. From April 2026, optometrists have been able to order the medicines or devices required for the treatment of those conditions under the NHS using a signed order. Community pharmacies are then able to supply NHS-funded medicines ordered by optometrists in Wales on a standardised NHS signed order form.

This formulary document provides clinical information on eye preparations, including indications and product types, to support WGOS optometrists to work safely and consistently within national guidance. It also includes good-practice recommendations to enable optometrists to offer effective advice before writing a signed order.

All Wales self-administration of medicines framework

Published: Mar '26

Views: >900

This framework provides clear, standardised guidance to inform local policy to ensure that patients who self-administer their medicines at home can continue to do so safely during hospital admissions. This aligns with efforts to reduce hospital-acquired deconditioning and enhance patient autonomy as part of the Safe Care Collaborative.

Updates to resources

Minor updates were also made to the resources below between April 2025 and March 2026.

- [Prescribing dilemmas: A guide for prescribers](#)
- [All Wales COPD management and prescribing guideline](#)
- [All Wales adult asthma management and prescribing guideline](#)
- [CEPP National Audit - focus on antibiotic prescribing](#)
- [Endocrine management of gender incongruence in adults](#)

Acknowledgements

Our acknowledgement process aims to highlight resources, initiatives or campaigns that are already recognised or endorsed by a national body or institute and have been implemented or accepted as good practice in Wales. Between April 2025 and March 2026, we acknowledged the following:

- All Wales Guidance on Flushing Intravenous Administration Lines in Adults

All of the [acknowledged resources](#) can be found on the AWTTTC website.

AWMSG Medicines Optimisation Framework review

This year saw AWTTTC begin an all-encompassing review of the 'Medicines Optimisation Framework' (originally published in April 2021) which describes how AWMSG's medicines optimisation resources are created, from proposal by stakeholders, to endorsement, dissemination, and review.

The early phases of this review have been focused on vital stakeholder engagement

to ensure the review reflects the priorities and needs of the public and health and social care professionals in Wales. Alongside targeted engagement with AWMSG and its subcommittees, stakeholder groups including the Directors of Pharmacy Peer Group and the National Clinical Network Leads (NHS Wales Performance and Improvement), AWTTTC have established a number of channels to capture the thoughts of anyone who wishes to input. Please visit the [AWTTTC website](#) for more information on the review and current opportunities for sharing feedback.



Prescribing monitoring and analysis

National Prescribing Indicators

25

We monitor and analyse prescribing data to benchmark performance and drive improvements in NHS Wales.

National Prescribing Indicators (NPIs) are used to highlight therapeutic priorities for NHS Wales and compare the ways in which different prescribers and organisations use particular medicines or groups of medicines. NPIs are evidence-based, clear, easily understood and allow health boards, primary care clusters, GP practices and prescribers to compare current practice against an agreed standard of quality.

National Prescribing Indicators 2025–2028

The 16 [NPIs for 2025–2028](#), endorsed by us, focused on four priority areas (analgesics; antimicrobial stewardship; respiratory and SGLT-2 inhibitors) supported by additional indicators grouped under safety and efficiency.

AWTTC publish a [quarterly report](#) analysing the performance of each health board against the current set of NPIs.

Priority areas

Analgesics
Antimicrobial stewardship
Respiratory
SGLT-2 inhibitors

Supporting domains

Safety	Efficiency
Prescribing safety indicators	Best value biological medicines
Hypnotics and anxiolytics	Low value for prescribing
Yellow Cards	

Server for Prescribing Information Reporting and Analysis (SPIRA)



[SPIRA](#) is updated quarterly with NPI data for health boards, clusters and individual GP practices in Wales, giving a more detailed view of local prescribing. SPIRA also includes additional data, such as AWTTTC's inhaler decarbonisation dashboard, a range of 'Efficiencies' dashboards, and a dashboard focusing on the use of opioids across Wales. These interactive dashboards for comparative analysis of prescribing data can be accessed by users on the NHS Wales Network.

New SPIRA dashboards developed and made available in 2025–2026 include:

- Nitrous oxide dashboard
- Inhaler decarbonisation – Quantity volume
- 'Value and Sustainability' recommendation 2026–2027

Horizon scanning and financial forecasting service

AWTTC's horizon scanning and financial forecasting team supports the NHS in Wales by providing clear information on new and emerging medicines and their likely impact on budgets and service delivery. The team identify, monitor and assess the potential impact of medicines listed on the National Institute for Health and Care Excellence (NICE) work programme. They focus on those medicines expected to receive a licence and become routinely available in the UK in the current or next financial year. The team provides early estimates of the likely costs of new medicines, based on the evidence available. This information is shared securely with named NHS colleagues in Wales to support their financial planning.

New medicines are becoming more complex, so we need to understand what services will be needed to support their use. Close collaboration with other organisations is essential to identify the issues specific to the NHS in Wales. These organisations include the NHS Wales Joint Commissioning Committee (NWJCC), Medicines Value Unit (MVU), All Wales Medical Genomics Service (AWMGS), National Pathology



**9 meetings
with the SACT
Horizon Scanning
Collaborative
Group**



**50 cancer medicines
reviewed and rated
in terms of service
delivery and
budget impact**



The collaboration has enabled the All Wales Medical Genomics Service to plan genomic services to meet the needs of patients in Wales.

Rhian White, Interim Director of Laboratory and Head of Cancer Genomics.



Programme, Advanced Therapies Wales, clinicians and clinical networks. The work of the Systemic Anti-Cancer Therapies (SACT) Horizon Scanning Collaborative Group is a good example. This group supports system preparedness by assessing the potential impact of new cancer medicines before NICE publishes its recommendations. This proactive approach identifies potential service delivery issues on a Once-for-Wales basis, enabling effective and timely planning.

The AWTTC horizon scanning team have also identified new non-cancer medicines that could significantly impact on service delivery. This work will be developed further with input from key stakeholders.

The team also introduced a set of metrics measuring the timeliness of service and budget impact assessments, to track progress across the work programme.

See [AWTTC's horizon scanning webpage](#) for further information.

The Welsh Government aims to make sure patients in Wales have quick and equitable access to medicines with proven clinical and cost-effectiveness. Health technology assessment (HTA) evaluates the clinical and cost effectiveness of a medicine. NICE HTA guidance applies in England and Wales, and AWMSG provides advice on medicines not included in the NICE work programme. AWTTTC supports AWMSG in providing [evidence-based assessment processes](#).

2025–2026 represents the first full year of medicines assessment after the processes were [reviewed and refined in 2024](#). Our updated medicine assessment process supports an All-Wales approach to medicine access and focuses on efforts to identify areas of unmet need. Medicines are identified for assessment through the AWTTTC horizon scanning process and engagement with industry, healthcare professionals and the public. The AWMSG Scrutiny Panel, constituted from NHS Wales and with lay membership, advises on the route and priority of medicines for assessment by the AWMSG sub-groups. AWMSG has two sub-groups that assess medicines and give their recommendations

to AWMSG: the Licensed One Wales Medicines Assessment Group (LOWMAG) assesses licensed medicines, and the One Wales Medicines Assessment Group (OWMAG) assesses medicines used off-label (that is, a medicine used outside the terms of its UK licence).

AWMSG plays a governance role, ensuring that the sub-groups provide a fair and transparent process. The medicine recommendations are then sent to the Welsh Government for ratification. Once ratified by the Welsh Government, implementing these recommendations across NHS Wales will ensure equitable and consistent access to those medicines for patients in Wales.

Details of the [assessment process for licensed and off-label medicines](#) are on the AWTTTC website.



19 medicines considered by AWMSG Scrutiny Panel

9 medicines assessed by LOWMAG and OWMAG (+1 via old process)



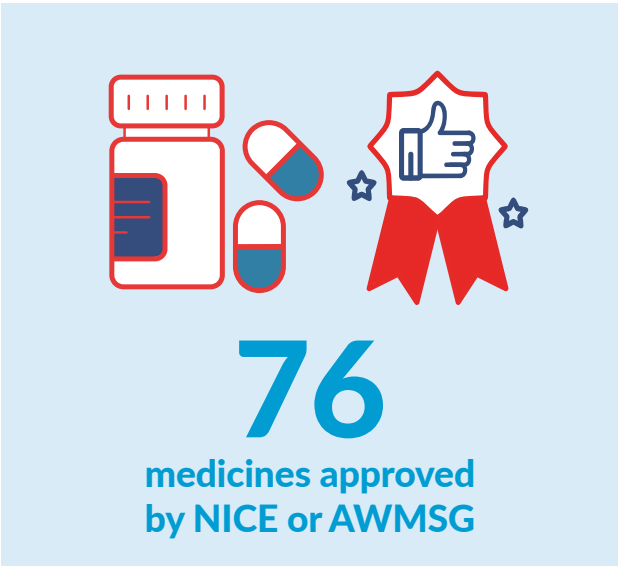
10 medicine recommendations endorsed by AWMSG

7 off-label medicine reviews



Health boards are expected to make medicines available for prescribing to patients within 60 days of the National Institute for Health and Care Excellence (NICE) publishing a Final Draft Guidance or Final Evaluation Determination, or within 60 days of the Welsh Government’s ratification of AWMSG advice.

AWTTC provide regular reports to the Welsh Government on the formulary status of medicines that we, or NICE, recommend for use within NHS Wales.

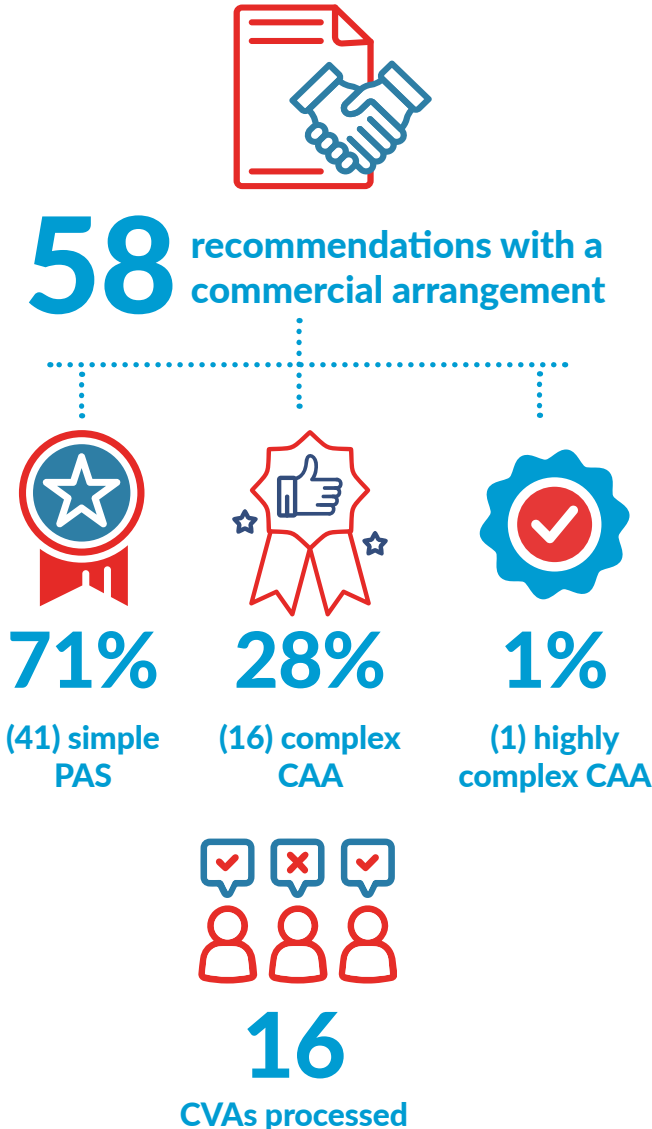


Commercial Medicines Access Team

The Commercial Medicines Access Team (CMAT) is a collaborative multi-organisational team of colleagues from AWTTC, NHS Wales Shared Services Partnership (NWSSP) and the Medicines Value Unit.

The role of CMAT is to support and monitor the implementation of AWMSG- and NICE-recommended medicines associated with a commercial arrangement within the NHS in Wales. A commercial arrangement improves the cost effectiveness of a medicine; it can be a Patient Access Scheme (PAS) or a Commercial Access Agreement (CAA). This underpins the essence of [A Healthier Wales](#), allowing patients timely access to medicines, while ensuring that the NHS in Wales obtains the maximum possible value for money where medicines are concerned.

CMAT are processing an increasing number of commercial arrangements, and with an increase in the number of complex CAAs coming to Wales, the process of managing, monitoring and retrieving rebates for the NHS in Wales becomes significantly more



challenging. To support this work, the [Commercial Arrangement Scheme Wales Group \(CASWG\)](#) was established. CASWG is an AWMSG sub-committee which has increased stakeholder involvement, transparency and governance around the approval of commercial arrangements on behalf of NHS Wales.

In addition to new commercial arrangements, CMAT and CASWG processed an increased number of contract variations (CVAs) to existing agreements. These CVAs were undertaken for various reasons, including but not limited to; ensuring full coverage of agreement terms, updated pricing, inclusion of NHS Wales cross-border patients and alterations to rebate mechanisms.

Blueteq High Cost Drug System

The [Blueteq High Cost Drugs \(HCD\) System](#) ensures that medicines are prescribed in accordance with medicines assessment guidance issued by AWMSG and NICE. Adopting the system will ensure we get the right treatment to the right people in Wales.



This year, through VPAG funding, AW TTC formed a small team to drive forward the second phase roll out of the Blueteq system in Wales. AW TTC has worked with the Blueteq steering group and clinical networks to prioritise and publish Blueteq forms for weight management, cancer, rheumatoid arthritis and severe asthma. AW TTC aim to complete all historic priority forms by the second quarter 2026–2027 whilst also focusing on readiness of forms for newly approved medicines. Implementation and system readiness will allow NHS Wales to manage the ever-increasing complexities associated with prescribing high-cost treatments and ensuring consistency across Wales in line with national guidance. The deadline for the full roll out across health boards and trusts is the end of March 2027.

January-March 2026



15

All Wales consultations



551

forms in development



195

forms enabled

Research and publications

Activity during 2025–2026

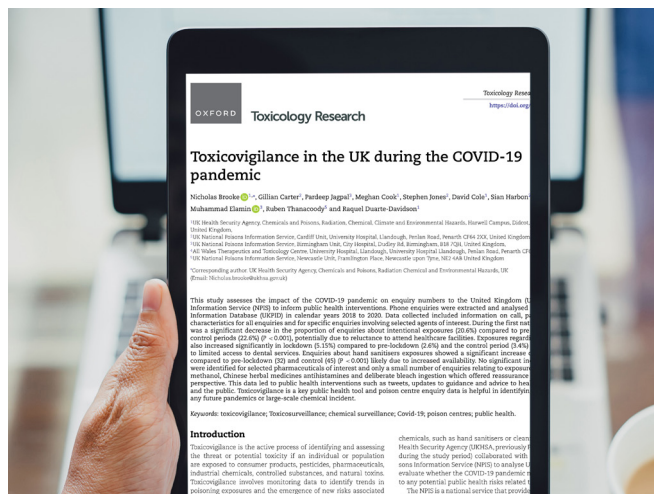
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In addition to AWTTTC supporting all of the work that goes through AWMMSG, AWTTTC's [Research Group](#) facilitates high-quality research into the safe and effective use of medicines in Wales. The key research themes include: access to medicines, medicines optimisation and medicines safety.



5 peer reviewed articles published

- [The role of social workers in medicines management for older adults in Wales](#)
- [GLP-1 agonist-associated presentations to unscheduled care](#)
- [Trends in tricyclic antidepressant prescribing and poisoning in England and Wales](#)
- [A 10-year retrospective review of mushroom exposures reported to the UK NPIS](#)
- [Toxicovigilance in the UK during the COVID-19 pandemic](#)



17 conference posters presented

Prescribing and Research in Medicines Management 35th Annual Scientific Meeting, Manchester

- [Standardising penicillin allergy de-labelling in secondary care](#)
- [Prescribing medicines with high](#)

[anticholinergic burden in Wales](#)

- [Prescribing of drugs resulting in a combined score of 3 or more on the Anticholinergic Effect on Cognition scale](#)
- [Reducing antimicrobial course duration for improved health and environmental outcomes in NHS Wales](#)

45th International Congress of the European Association of Poisons Centres and Clinical Toxicologists, Glasgow

- [A retrospective study of case reports received by UK NPIS involving exposures to caterpillars](#)
- [Recreational abuse of ibotenic acid and muscimol-containing mushrooms reported to the UK NPIS](#)
- [Intentional overdoses in children aged 10-years and younger reported to the UK NPIS](#)
- [Survival following ingestion of several medications including a fatal dose of cenobamate](#)
- [Severe paediatric poisoning following exposure to pyrethrin and cypermethrin insecticides](#)

- A retrospective review of all hemlock ingestions reported to the UK NPIS
- A case of glycerol toxicity in a child following ingestion of slush-ice drinks



19th Medical Chemical Defense Conference, Munich

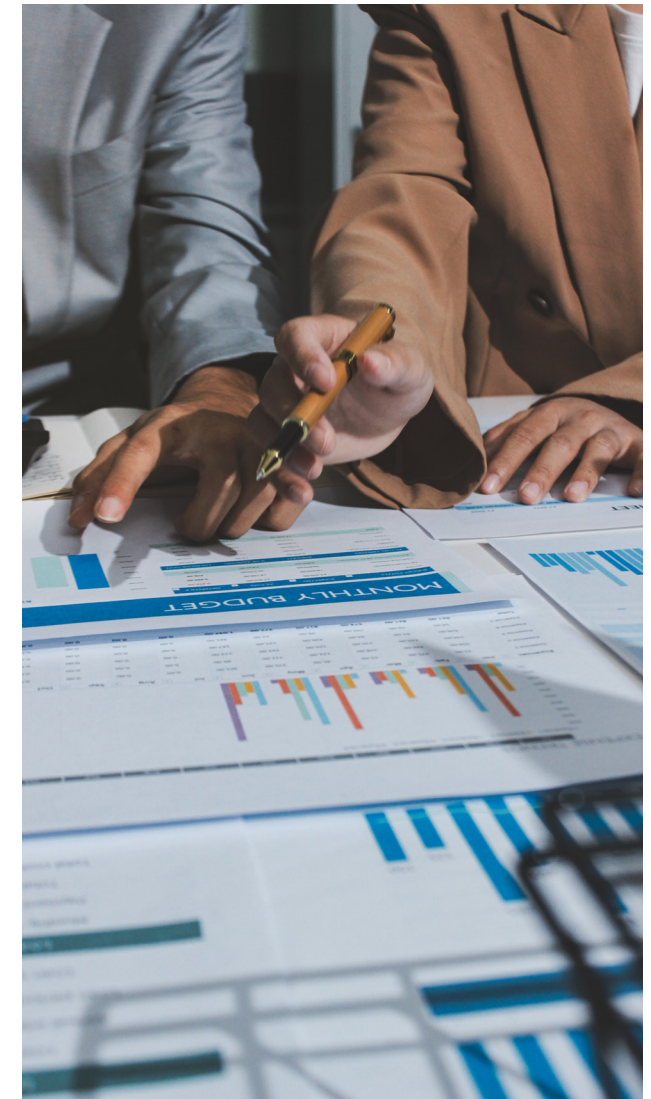
- A 10-year retrospective study of pralidoxime use as an antidote for organophosphate poisoning reported to the UK NPIS
- Exposures to hydrofluoric acid in the workplace
- A 10-year retrospective review of anthrax enquiries to the UK NPIS

Antibiotic Guardian Awards, Birmingham

- Getting the label right – are you really allergic to penicillin?
- Prescribe Wisely: Adhere to recommended antimicrobial course durations

Royal Pharmaceutical Society (RPS) Annual Conference, London

- Developing the 2025–2028 national prescribing indicators for NHS Wales



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Please note information in this document is correct at the time of print but may be subject to change.

For the latest information, please visit:

awttc.nhs.wales (English website)

cttcg.gig.cymru (Welsh website)

[@AWTTCcomms](#) (English X account)

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