

## **ALL WALES PRESCRIBING ADVISORY GROUP (AWPAG)**

**Minutes of meeting held on  
25<sup>th</sup> June 2025 commencing at 9.30 am  
Held at the All Nations Centre, Cardiff and via Teams**

**Chair** – Dr Laurence Gray Consultant Clinical Pharmacologist, Cardiff & Vale UHB

### **Voting members**

Mrs Vicky Allum (PM)	Head of Pharmacy, Primary Care and Community Services, Betsi Cadwaladr UHB
Mrs Dianne Burnett	National Lead, Medicines Information
Ms Helen Davies	Principal Pharmacist for Medicines Optimisation in Primary Care, Cwm Taf Morgannwg UHB
Mrs Sarah Davies	Senior Lecturer Advanced Clinical Practice, Swansea University
Ms Cassandra Edgar (AM)	Clinical Effectiveness Lead Pharmacist, Primary Care, Betsi Cadwaladr UHB
Dr Jennifer Ellis	General Practitioner, Betsi Cadwaladr UHB
Mrs Sian Evans	Consultant in Public Health, Public Health Wales
Dr Lynette James	All Wales Consultant Pharmacist, Acute Care & Medication Safety
Ms Hazel Hopkins	Prescribing Support Pharmacist, Hywel Dda UHB
Mrs Sue Knights	ABPI representative
Mr Malcolm Latham	Lay member
Mr Usman Malik	Principal Pharmacist, Velindre NHS Trust
Mrs Eryl Smeethe	Lead Prescribing Advisor, Aneurin Bevan UHB
Mr Jonathan Smith	Community Pharmacist
Mr Emyr Stephens	Lead Pharmacist for Primary, Community and Intermediate Care, Cardiff & Vale UHB
Ms Bethan Thain	Primary Care Pharmacist, Medicines Management, Swansea Bay UHB
Mr Owain Williams	Director of Pharmacy
Mrs Fiona Woods	Lay member

### **In attendance (non-voting)**

Mr Andrew Evans	Welsh Government
Dr Andrew Champion	AWTTC Programme Director
Mrs Claire Thomas	AWTTC Head of WAPSU and Medicines Optimisation
Dr Tom Curran	AWTTC Principal Scientist
Mr Richard Boldero	AWTTC WAPSU Pharmacist
Dr Paul Deslandes	AWTTC WAPSU Pharmacist
Mrs Karen Jones	AWTTC Senior Pharmacist
Ms Shaila Ahmed	AWTTC Senior Pharmacist
Dr Katherine Chaplin	AWTTC Scientist
Mrs Sian Harbon	AWTTC Medical Writer

### **Observing**

Mrs Ruth Lang	AWTTC Head of Administration and Liaison Manager
Dr Sara Pickett	AWTTC Health Economist
Ms Jessica Morgan	AWTTC Communications

## External presenters

NAME	ITEM	TITLE
Meryl Davies	7.1	Primary care antimicrobial guidelines - COVID-19 antivirals monograph
Meryl Davies	7.2	Primary care antimicrobial guidelines – minor updates
Kate Nambiar	7.3	Endocrine management of gender incongruence – minor update
Mared Owen Sarah Hulse Jonathan Underwood	7.4	HIV-1 antiretroviral prescribing guidelines
Carys James	7.5	All Wales Common Ailments Service formulary – Back pain
Alya Al-Afan Carys James	7.6	All Wales Common Ailments Service formulary – Diarrhoea, Dyspepsia, Constipation, Threadworm – minor updates
Dr Katie Pink	7.9	Adult asthma management and prescribing guidelines – 2025 update
Andrew Evans David O’Sullivan Mike George	7.10	Wales General Ophthalmic Services – Signed Orders Formulary

## Key of abbreviations

AWMSG	All Wales Medicines Strategy Group
AWTTC	All Wales Therapeutics and Toxicology Centre
CAS	Common Ailments Service
NICE	National Institute for Health and Care Excellence
PHW	Public Health Wales
SIGN	Scottish Intercollegiate Guidelines Network
SPIRA	Server for Prescribing Information Reporting and Analysis
UHB	University Health Board
WAPSU	Welsh Analytical Prescribing Support Unit
WMAS	Welsh Medicines Advice Service

## **1.0 Welcome and introduction**

The Chair opened the meeting and welcomed everyone in attendance.

## **2.0 Apologies**

Apologies had been received from:

Ms Joe Castle	ABPI
Mrs Clare Clement	Lead Pharmacist for Primary, Community and Intermediate Care, Cardiff & Vale UHB
Mr Paul Fleming	Medicines UK, Technical Director
Mr Michael Clarke	Medicines UK

## **3.0 Declarations of Interest and Confidentiality Agreement**

The Chair asked members to declare any interests relevant to the agenda; no relevant interests were declared.

## **4.0 Chair's report** **Membership**

### Appointments

The Chair was pleased to announce the appointment of Aled Richards as alternate pharmacy representative for Hywel Dda UHB.

The Chair reminded members that there are currently vacancies for doctor members from Swansea Bay, Hywel Dda, Aneurin Bevan, and Powys health boards, in addition to Velindre NHS Trust. The Chair noted that a GP member from Cwm Taf Morgannwg had recently been appointed.

The Chair highlighted that agenda items would have to be moved around to accommodate the availability of external presenters at the meeting.

## **5.0 Minutes of previous AWPAG meeting – 19<sup>th</sup> March 2025**

The minutes of the previous meeting were checked for accuracy and agreed.

## **6.0 Feedback from AWMSG – 9<sup>th</sup> April, 20<sup>th</sup> May and 18<sup>th</sup> June 2025**

Members were provided with feedback from the most recent AWMSG meetings:

### For endorsement

- All Wales Common Ailments Service Formulary – Monograph for Allergic Rhinitis
- Policy for the sustainable procurement, management, administration, and disposal of medical gases within the hospital setting to achieve decarbonisation.
- Urgent Requests for Repeat Medication – Guidance for community pharmacy, NHS 111, and out-of-hours primary care services

### For information

- Phenoxymethylpenicillin prescribing in Wales
- All Wales Common Ailments Service formulary (minor updates)
- Primary care antimicrobial guidelines
- All Wales policy for medicines administration, recording, review, storage, and disposal (MARRS) (minor updates)
- National Prescribing Indicators 2024–2025: Analysis of Prescribing

Data to December 2024

- NHS Wales inhaler carbon footprint report - February 2025
- Variation in prescribing
- National Prescribing Indicators 2024–2025: A focus on hypnotics and anxiolytics

Dr Katherine Chaplin gave an overview of the 'Focus on hypnotics and anxiolytics' report that had been presented to AWMSG. Members queried if it was known why the decrease in hypnotic prescribing was starting to slow, and Dr Chaplin confirmed the reason was not clear. It was noted there was one outlying practice in Swansea Bay UHB, the practice had been contacted and their initiatives shared as part of a good practice spotlight. AWTTTC are in discussion with ScriptSwitch about developing messages for hypnotics and anxiolytics and noted that volunteers to review these messages would be sought via email after the meeting.

Dr Chaplin highlighted that propranolol had been included within the report due to prescribing for anxiety. Propranolol is only licensed for the physical symptoms of anxiety, and there is limited evidence for its use.

Members noted that prescribing changes can take a long time to show in such large data sets, but change is being achieved.

## **7.0 Documents for discussion**

### **7.1 Primary care antimicrobial guidelines - COVID-19 antivirals monograph**

Meryl Davies gave an overview of the new monograph for COVID-19 antivirals that will be added to the Primary Care Antimicrobial Guidelines. It has been developed with the All Wales Antimicrobial Guidance Group. The document went out for consultation and only received two minor comments.

Members queried that in some areas a second line therapy is listed as an IV medication. Meryl Davies advised that in these patients the GP will need to refer patients to secondary care for IV antivirals, as these are unable to be administered within a GP surgery. It was confirmed that information on how a GP can refer to secondary care for administration of sotrovimab is available locally on Eolas.

Usman Malik queried whether patients under the care of Velindre would need to be treated in Velindre, or via their local health board, it was confirmed that would be via their local health board.

Members asked for a statement to be added to the document to also encourage patients to fill in Yellow Card reports.

Members queried if the impact of these guidelines and the change in therapy provision was going to be measured, and if not then it is something that should be considered going forward. It was noted that this would lie with Welsh Government.

Members agreed that, subject to the minor addition agreed, the monograph could proceed to AWMSG for endorsement.

**Action: Proceed to AWMSG for endorsement**

## **7.2 Primary care antimicrobial guidelines – minor updates**

Meryl Davies gave an overview of four minor updates for consideration by AWPAG.

Chicken pox and Shingles entries had been updated because of changes in the NICE Clinical Knowledge Summary and UK Health Security Agency advice. This included adding advice to enforce the need to engage with specialists for advice on treatment of chicken pox in pregnant women; defining what is meant by an immune-naïve pregnant woman; removal of immunoglobulin treatment options, and removal of valaciclovir as a treatment option in pregnant women.

Members queried whether all patients who present with shingles require a HIV check and whether this applies to shingles and chicken pox or just shingles. It was agreed that the information would be checked and reflected in the guidance before publication.

Members discussed that, where paracetamol is recommended in managing fever with chicken pox, there should be an addition to highlight the need to avoid non-steroidal anti-inflammatory drugs (NSAIDs).

It was highlighted that 'Out-of-hospital sepsis and meningitis' sections had been amended to align with NICE guidance on meningitis. There had been a change to ceftriaxone as the agent of choice, and a change in dilutant from lidocaine to water for injection. Members requested that the words 'water for injection' and 'sodium chloride' were written in full rather than the abbreviation used in the document.

**Action: Following agreed amendments, minor updates to proceed to publication and then AWMSG for information.**

## **7.3 Endocrine management of gender incongruence in adults – minor updates**

Dr Kate Nambiar presented the proposed changes to the 'Endocrine management of gender incongruence in adults' document.

Members agreed with the changes made to the section on routine endometrial ultrasound screening, to reflect that this is no longer recommended in trans people based on current evidence.

The second change discussed was the proposed addition of a section related to micronised progesterone following an increasing number of people requesting micronised progesterone as an adjunct to their hormone therapy. The intention of the change was to encourage GPs to seek guidance from the Welsh Gender Service if they encountered such patients

Members queried inclusion of guidance around this therapy given the limited body of evidence of effectiveness. It was agreed that AWTTTC would investigate

review of this under the new Medicines Ecosystem process. Dr Nambiar offered to be involved in the process, and it was noted that this would be very welcome.

**Action: Publication of the endometrial ultrasound screening update to be postponed until an appropriate way forward regarding micronised progesterone is agreed. Members to be updated with regards to review via Medicines Ecosystem process.**

#### **7.4 HIV-1 antiretroviral prescribing guidelines**

Mared Owen, Sarah Hulse, Jonathan Underwood and Karen Jones gave an overview of the document which had been produced by the All Wales HIV Pharmacist Group and the All Wales Antiretroviral Prescribing Group.

Some formatting issues within the tables had been identified by the group, and it was noted that these would be resolved in the next draft. Members requested the addition of a glossary within the document to aid readers.

Members raised concerns about the wording around statin prescriptions, emphasising the importance of offering rather than prescribing, to respect patient autonomy and shared decision-making. Alignment to existing AWMSG guidance would be checked to ensure consistency of advice.

Members agreed that they were happy for the document to proceed to consultation.

**Action: Document to be reviewed and updated prior to consultation. Post meeting note: Subsequent discussion between members of the All Wales HIV Pharmacist Group, the All Wales Antiretroviral Prescribing Group and AWTTTC concluded that it would be of benefit to bring the updated document back to AWPAG in September prior to consultation.**

#### **7.5 All Wales Common Ailments Service formulary – Back pain**

Dianne Burnett presented the changes to the All Wales Common Ailments back pain monograph following consultation.

The first point of discussion was the inclusion of paracetamol and members agreed to remove it from the monograph. Members requested that exercise be added to the overview of treatment section to ensure it is advised as a non-pharmacological method of treatment. Members also queried the layout on page 5, noting that the risk factors for NSAID-induced gastrointestinal adverse events were included in a green-coloured box, which could give the impression that these factors indicated safety.

There was discussion around the risks associated with prescribing NSAIDs and the use of proton pump inhibitors. While high-risk patients are not suitable for treatment under the CAS, those at moderate risk are. Members discussed amending this section to better reflect the balance of risks and benefits, including guidance on referral to an appropriate prescriber. It was noted that not all community pharmacist independent prescribers are able to prescribe for back pain. It was suggested that the document clarify that patients should be referred to an appropriate independent prescriber whose scope of practice includes back pain. Members agreed that topical NSAIDs should not be

included as a treatment option. There was also discussion around adding the use of a covered hot water bottle to Section 4.5, which was agreed.

Finally, there was discussion about inclusion of the word “cancer” in the amber (intermediate risk) box and concerns about how patients might respond to this wording. It was decided to remove the word “cancer” and to consider removing “spinal cord compression” from the red (high risk) box. There was also a suggestion to re-order the amber intermediate risk box to list conditions according to those carrying the highest risk.

**Action: ‘Back pain’ monograph to be amended and circulated for electronic sign-off, before presentation to AWMSG for endorsement.**

#### **7.6 All Wales Common Ailments Service formulary – Diarrhoea, Dyspepsia, Constipation, Threadworm – minor updates**

Dianne Burnett presented the proposed minor updates. Members were asked to consider whether the changes could be approved as ‘minor’, or should be classed as ‘major’, requiring a consultation. Members agreed that the changes should be considered as minor updates, with no further changes requested.

**Action: Publish Diarrhoea, Dyspepsia, Constipation and Threadworm monographs and present to AWMSG for information.**

#### **7.7 All Wales Shared Care Framework – 2025**

Shaila Ahmed presented an overview of the consultation feedback, and the subsequent changes made to the All Wales Shared Care Framework.

Members requested that the term “carer” or “caregiver” be used more consistently throughout the document and that a reference to a person with lasting power of attorney be included in Section 5.2. Concerns were raised about the use of the word “exceptional” in Section 6.8, with members suggesting it could limit the discretion of primary care prescribers. It was agreed that this section should be reworded. In Section 6.17, it was agreed that the responsibility for writing or transcribing MAR charts should be included within the shared care protocol rather than specifying that this is solely a GP or primary care prescriber responsibility. Members further suggested clarifying that the audit tool is a template that can be adapted locally. They also requested that links be added to the AWMSG-endorsed patient information leaflet on medicines shortages. Additionally, members asked for the shared care patient consent form to include a section for recording the version number or publication date of any patient information leaflet referenced. They also proposed adding to the audit template a recommendation to capture patient feedback on their experience of shared care.

**Action: Document to be amended and confirmed by Chair’s action, followed by presentation at AWMSG for endorsement.**

#### **7.8 Strategies to reduce gabapentinoid prescribing in NHS Wales**

Shaila Ahmed presented the evidence report summarising strategies for deprescribing gabapentinoids. Members were informed that a Gabapentinoid Task Force had been established in response to growing concerns about misuse and abuse, with the aim of developing national strategies to help reduce

prescribing. The report drew on a range of sources, including health board initiatives, published studies, service improvement projects, clinical guidelines, and other relevant materials, and its recommendations were reviewed and discussed by the task force. Members were advised that the group supported developing an All Wales Gabapentinoid Resource Pack. The resource pack is intended to act as a 'one-stop shop' for healthcare professionals, providing quick and convenient access to key resources during consultations.

Members asked whether patients were involved in the task and finish group and suggested that including a patient representative, ideally someone with lived experience of gabapentinoid use, would be valuable. Members were informed that patient information materials would be subject to patient feedback. There was also discussion about the potential use of videos as part of patient education materials. Members were informed that a first draft of the All Wales Gabapentinoid Resource Pack will be presented to AWPAG in September.

**Action: Proceed to AWMSG for information.**

### **7.9 All Wales adult asthma management and prescribing guidelines – 2025 update**

Richard Boldero introduced Dr Katie Pink who detailed updates made to the All Wales Adult asthma management and prescribing guidelines following the publication of the recent NICE/BTS/SIGN guidelines at the end of 2024. The main changes to the document were focused on the single-page algorithm, with additional changes made to the supporting notes.

Members made some suggestions for further minor amendments. There was some discussion around including additional inhalers which are bioequivalent to current options, but it was determined that the current listings were sufficient.

Overall, members considered the changes to be a minor update therefore not requiring consultation. Richard Boldero highlighted the issue of how updates to the guidelines should be made in the future. Members agreed that any updates required discussion at an AWPAG meeting, therefore following the minor update process.

**Action: Document to be amended, minor updates published and presented to AWMSG for information.**

**Action: Future updates to follow the 'minor update' process.**

### **7.10 Wales General Ophthalmic Services – Signed Orders Formulary**

Andrew Evans, David O'Sullivan and Mike George gave an overview of the background to the development of the proposed Signed Orders Formulary. The eye care contract in Wales has recently changed and the new Wales General Ophthalmic Service has been created. The aim is to give more autonomy to optometrists to recommend treatments via a written signed order, to be dispensed by a community pharmacist. The optometrist would write a letter to the patient's GP if an ongoing prescription was required. The signed orders will be paper forms that will look and feel like a prescription.

It was noted that dry eye and conjunctivitis are currently included in the CAS, and it was requested that similar terms and arrangements were used between the

Signed Orders Formulary and CAS Formulary; for example, issuing one bottle of chloramphenicol to treat both eyes, rather than one bottle per eye.

Members queried why dry eye preparations were listed generically rather than specifying a particular brand. It was noted this was to enable the community pharmacist to dispense the generic or branded version that they had in stock. Members asked if there would be an audit to see if there was a shift in patient numbers from CAS to optometry for these ailments. It was advised that monitoring will likely be part of implementation. Members queried if it included temporary residents as well, and this was confirmed. Members asked if there would be any way to track patient satisfaction, and Welsh Government confirmed that this will be looked at.

**Action: Minor amendments to be made and document to proceed to consultation**

## **8.0 Verbal updates**

### **8.1 SPIRA Steering Committee feedback**

Richard Boldero updated members on the most recent meeting and noted that changes would be made to the SPIRA landing page following user feedback. He confirmed information would be shared with members by email following the meeting for their feedback.

### **8.2 Learning at Lunch**

Sian Harbon highlighted that the last learning at lunch session was held on the 7<sup>th</sup> May 2025 with topics including propranolol poisoning, the CKD Quality Improvement Programme in primary care, and current trends in poisoning from the National Poisons Information Service.

The next learning at lunch will be held on Thursday 10<sup>th</sup> July 2025 1–2pm with topics including Decarbonisation of medical gases: Nitrous oxide project, and the new Medicines Ecosystem in Wales. All members are invited to attend by registering on the website.

### **8.3 Document review process**

Tom Curran advised all seven documents that were brought to the March 2025 AWPAG meeting and considered appropriate for retirement will have been retired on the AWTTTC website within the next week. All documents that have been approved by AWPAG to date have now had a retired watermark added throughout the documents as requested at an AWMSG meeting earlier this year.

### **8.4 Best Practice Day**

Claire Thomas shared that the Best Practice Day was due to be held on Wednesday 2<sup>nd</sup> July 2025. Over 170 people had registered and planned to attend the event, which will be held jointly by AWTTTC and Yellow Card Centre Wales. Claire Thomas noted that plans for 2026 will be underway in the autumn, and should members have any suggestions for topics, this would be welcomed.

Members asked that dates for the 2026 event are considered further in advance so they could plan for attendance while being mindful of other meeting dates.

#### **9.0 Feedback from the All Wales Directors of Pharmacy**

Owain Williams informed members that the delivery assurance groups have now been set up and most recently, Health Education and Improvement Wales delivered a presentation on pharmacy trainees that was well received.

#### **10.0 Feedback from Health Boards and Velindre NHS Trust**

Aneurin Bevan University Health Board launched their Only Order What You Need initiative in May 2025. This has been very well received with many GP practices in the area displaying information and participating.

#### **11.0 Feedback from Public Health Wales**

Sian Evans fed back that they are currently reviewing 850 posters as part of the General Medical Services quality improvement scheme. It had been good to see what practices had done, however it was noted that there was variation in the standards of posters reviewed so far.

#### **12.0 Any other business (Chair to have been informed prior to the meeting)**

Extended periods of treatment – task and finish group: Claire Thomas advised that Welsh Government had commissioned behavioural insights work due to finish in July 2025 related to the barriers and facilitators of moving towards a longer treatment interval. The Welsh Pharmaceutical Committee had asked AWTTTC to look at the findings of that report when it is published and develop resources to help implement the recommendations. In the coming months we will be seeking member interest for joining a task and finish group to develop these resources.

Prescribing Dilemmas: Paul Deslandes advised that the letter and leaflet from the National Pathology Programme Managers had been circulated to members regarding private test costs. Members were asked to consider the email and whether the Prescribing Dilemmas document requires updating because of this information.

Branded generic dashboard: Richard Boldero advised that AWTTTC have been asked to develop a dashboard to monitor the use of branded generic medicines, following the position statement issued towards the end of 2024. AWTTTC are seeking user-testers from health boards to give feedback on the dashboard and the medicines enclosed within each basket and will follow up via email for volunteers.

#### **13.0 Date of next meeting: Wednesday 17 September 2025**