



Midlands and Lancashire  
Commissioning Support Unit



Pan Mersey  
Area Prescribing Committee

# Pan Mersey Area Prescribing Committee Annual Report 2019-20

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## Pan Mersey Area Prescribing Committee

The Pan Mersey Area Prescribing Committee (APC) was formally established in February 2013 as a vehicle to allow Clinical Commissioning Groups (CCGs) across Merseyside and Warrington to work collaboratively around the commissioning of medicines. NHS Wirral CCG subsequently joined the APC in January 2018. This paper gives an overview of APC activity in the 2019-20 financial year.

The APC involves 27 NHS organisation including CCGs, NHS Trusts and Community Trusts, which are listed in [Appendix 7](#). NHS Midlands and Lancashire Commissioning Support Unit (MLCSU) provides the administration function and expert medicines support to both APC and its subgroups as well as contributing to outputs and managing the stakeholder consultation process. Delivery of outputs is through a shared model, with the most appropriate organisations leading different areas and providing input as required.

MLCSU provides the administration and management of the [Pan Mersey APC website](#), which was redesigned in 2018/19. This includes development and maintenance of the Pan Mersey joint formulary using the NetFormulary platform. User feedback and further development is planned during 2020/21.

### Remit

The focus of APC activity has been to make recommendations to CCGs about commissioning of newly launched medicines, or medicines which have gained additional licensed indications. To this end, the new medicines review process was initially developed in Spring 2013. The review process enables robust assessment of the evidence base for the proposed commissioning of medicines, along with mechanisms to engage with clinicians and commissioners across the whole of the Pan Mersey health economy. The process was designed to take the minimum possible time so as not to introduce delays in decision-making for CCGs and has been refined as the APC has developed.

As well as reviewing individual medicines, it was recognised that recommendations on how each medicine should fit into an overall care pathway for a condition would be valuable. As a result, the APC formulary and guidelines subgroup have developed a joint health economy formulary and produce relevant guidelines for prioritised conditions.

When making commissioning recommendations, the APC also advises CCGs on the appropriate setting for prescribing, for example, specialist only, specialist initiation with ongoing prescribing in general practice, or general practice. This is communicated via the RAG rating, which is allocated according to [set criteria](#) as part of the medicines review process.

### Activity

[Appendix 1](#) gives an overview of the reviews undertaken by the new medicines subgroup in 2019-20; 38 new medicines reviews and prescribing policy statements were completed during this period.

[Appendix 2](#) and [appendix 3](#) list the work done on developing guidelines and shared care documents during 2019-20, which includes reviews of 18 statements, nine formulary chapters, seven guidelines, and 37 formulary amendments by the formulary and guidelines subgroup. In addition to this, the shared care subgroup developed two prescribing support documents and reviewed 12 existing frameworks which were also approved by the APC.

The safety subgroup published one new safety statement, updated two existing statements, performed one formulary update, and developed and published one drug safety supplement ([appendix 4](#)).

The antimicrobial guide review was completed at-scale and is awaiting APC consultation and ratification ([appendix 5](#)).

The APC also receives monthly reports on newly published NICE technology appraisals (TAs). CCGs are subsequently able to provide assurance that they have taken note of these and the APC will make recommendations on how they should be implemented, if appropriate. As a result, during 2019-20, a total of 14 NICE TAs were reviewed by the new medicines subgroup, with 15 policy statements produced and RAG recommendations made to APC. This work enables CCGs to be kept up to date on new NICE guidance and helps demonstrate compliance with the NICE TA mandatory requirements ([appendix 6](#)).

## Developments

Pan Mersey APC constantly strives to develop and improve its processes and has progressed a number of significant initiatives during 2019-20.

- Work to integrate the Pan Mersey formulary and the Wirral formulary was completed. The Pan Mersey joint formulary now reflects NHS Wirral CCG commissioning arrangements and supports consistent decision making for patients across the whole Pan Mersey footprint.
- APC work has had a positive impact on the Individual Funding Request (IFR) workload. For example, the inflammatory bowel disease guidelines have clarified the sequential use of biologics, provided information regarding when the "clock resets" between disease relapses and when ongoing post-operative therapy is warranted, thus reducing the number of IFRs that are received for this cohort of patients.
- The safety subgroup identified and responded to a need for information to supplement national safety alerts that would support prescribers and medicines optimisation teams. The final product was a one-page Drug Safety Supplement document owned by MLCSU that could be quickly turned around externally to the APC process.
- The MLCSU team developed opportunities to collaborate at scale on issues affecting the Antimicrobial Resistance (AMR) agenda. Work is currently ongoing on three projects: AMR prescribing reports for prescribers; audit of delayed prescribing; and an AMR software application to provide prescribing recommendations, decision support, clinical calculators, and peer group or practice personalisation with Fingertips indicators.
- The North Regional Medicines Optimisation Committee (RMOC) was established in June 2017. Meetings take place quarterly in Leeds and two APC members are members of the RMOC North committee. RMOC updates are provided to APC members following the meetings and RMOC newsletters are an APC standing agenda item. Local opinion and consultation are sought on draft RMOC documents where appropriate and Pan Mersey APC has implemented relevant RMOC recommendations such as the sequential use of biologics.
- One of the APC members has been actively involved in the development of RMOC national shared care criteria and documentation; showcasing how Pan Mersey APC has successfully implemented shared care by drug and influencing the process and content.
- MLCSU has continued to support the implementation of Blueteq to provide validation of High Cost Drug (HCD) data across multiple providers, utilising bespoke software systems which integrate seamlessly with Blueteq. The systems provide assurance that HCDs are being used in accordance with locally agreed APC policies and NICE TAs, ensuring that patients receive the most clinically and cost-effective treatment.

- New Blueteq forms continue to be developed and updated. Further training for Trusts is also available where required. Directorates within Trusts are continuing to adopt the Blueteq system. During 2019, data entry has progressed and in 2020 validation reports will be produced where data flows are established. During the interim period, MLCSU will continue to report queries from the HCD section of the Service Level Agreement Monitoring (SLAM) data flows.
- The NICE Pathways Committee was established in November 2018 to pilot the redesign of NICE pathways to enable integration into clinical systems and local care pathways. The Pathways Committee was tasked with producing a 'proof of concept' pathway design for diabetes, linking all relevant NICE guidance together in an easy-to-use digital format, which would then be used to model future NICE pathways. One APC member sat on this committee, attending regular meetings in London, and was actively involved in the pilot pathway redesign and sequencing of medicines, bringing a local APC perspective to the discussions. The project concluded in September 2019 and has provided direction to NICE for their future pathway design, including the information required by APCs to facilitate local implementation.

## APC subgroups

There are four subgroups of Pan Mersey APC: new medicines, formulary and guidelines, shared care, and safety. The new medicines subgroup and the formulary and guidelines subgroup hold meeting every month, the shared care subgroup and the safety subgroup hold meetings every two months. A fifth group of antimicrobial specialists continued their review of the primary care antimicrobial guide. Initially meeting on alternate months, much of the later communication and decision making was managed electronically. All subgroup outputs are consulted upon, with consultation feedback considered prior to the outputs being included on the APC agenda.

## Engagement with APC processes and recommendations

The level of engagement with APC processes can be gauged by considering both the attendance at meetings by stakeholder organisations and the proportion of APC recommendations which are subsequently adopted by CCGs. It should be borne in mind that differences may reflect variations in local service configurations rather than disagreement with APC recommendations. [Appendix 7](#) shows attendance at APC meetings by stakeholder organisations, which demonstrates a high degree of engagement with APC meetings.

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**Midlands and Lancashire CSU**  
**June 2020**

## Appendix 1 New medicines subgroup

From April 2019 to March 2020, 38 new medicines reviews and policy statements were produced and taken through the APC process with recommendations to CCGs. The new medicines subgroup is also responsible for reviewing NICE TAs ([appendix 6](#)).

New medicine review	Review type	APC	RAG rating
Dapoxetine for premature ejaculation	Review of existing statement	April 2019	Amber Retained
Budesonide for eosinophilic oesophagitis	Temporary (await NICE)	April 2019	Grey
Dapagliflozin for type 1 diabetes (in combination with insulin)	Temporary (await NICE)	April 2019	Grey
Fluocinolone intravitreal implant for non-infectious uveitis	Temporary (await NICE)	April 2019	Grey
Melatonin for insomnia in children	Temporary (await full review)	April 2019	Grey
Ticagrelor for ACS and prevention of atherothrombotic events post-MI	Review of existing statement (NICE)	May 2019	Amber Initiated
Alirocumab for reduction of cardiovascular risk in adults with established atherosclerotic CVD	Temporary (await application)	May 2019	Grey
Prasterone for vulvar and vaginal atrophy	Temporary (await application)	May 2019	Grey
Sodium zirconium cyclosilicate for hyperkalaemia	Temporary (await NICE)	May 2019	Grey
Risankizumab for plaque psoriasis	Temporary (await NICE)	May 2019	Grey
Evolocumab for reduction of cardiovascular risk in adults with established atherosclerotic CVD	Full evidence review (new)	June 2019	Black
Conjugated oestrogens and bazedoxifene for oestrogen deficiency in post-menopausal women	Review of existing statement	July 2019	Black
Roflumilast for COPD	Review of existing statement	July 2019	Amber Recommended

<b>New medicine review</b>	<b>Review type</b>	<b>APC</b>	<b>RAG rating</b>
Opicapone for Parkinson's disease	Review of existing statement	July 2019	Amber Recommended
Safinamide for Parkinson's disease	Review of existing statement	July 2019	Amber Recommended
Rasburicase for refractory, tophaceous gout	Review of existing statement	July 2019	Black
Fremanezumab for migraine prophylaxis	Temporary (await NICE)	July 2019	Grey
Galcanezumab for migraine prophylaxis	Temporary (await NICE)	July 2019	Grey
Melatonin for jet lag (and off-label use for other indications)	Temporary (await full review)	July 2019	Grey
Ranibizumab for choroidal neovascularisation (in conditions not covered by NICE TAs)	Review of existing statement	September 2019	Red
Nalmefene for alcohol dependence	Review of existing statement	September 2019	Individual CCG RAG rating
Cariprazine for schizophrenia	Full evidence review (new)	September 2019	Amber Retained
Ustekinumab for ulcerative colitis	Temporary (await NICE)	October 2019	Grey
Oral bisphosphonates for osteoporosis	Review of existing statement (NICE)	October 2019	Green
Sacubitril/valsartan for chronic heart failure	Minor update	October 2019	Amber Initiated
DOACs for treatment and prevention of VTE	Minor update	October 2019	Amber Initiated
DOACS for atrial fibrillation	Minor update	October 2019	Green
Doxylamine/pyridoxine for nausea and vomiting in pregnancy	Full evidence review (new)	November 2019	Green
Dupilumab for chronic rhinosinusitis	Temporary (await NICE)	November 2019	Grey

<b>New medicine review</b>	<b>Review type</b>	<b>APC</b>	<b>RAG rating</b>
Buprenorphine prolonged-release injection for opioid dependence	Temporary (await full review)	November 2019	Grey
Nicotine inhaler for nicotine dependence	Temporary (await full review)	January 2020	Grey
Ranibizumab for proliferative diabetic retinopathy	Temporary (await NICE)	January 2020	Grey
Brimonidine tartrate gel for facial erythema of rosacea	Review of existing statement	January 2020	Green
Addition of SGLT-2 inhibitors to insulin therapy for patients with type 1 diabetes	Pathway to support initiation of SGLT-2 inhibitors in type 1 diabetes	February 2020	Amber Retained
Insulin degludec for type 1 and type 2 diabetes	Review of existing statement	February 2020	Amber Initiated
Avatrombopag for treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure	Temporary (await NICE)	February 2020	Grey
Esketamine nasal spray for treatment-resistant depression	Temporary (await NICE)	February 2020	Grey
Upadacitinib for rheumatoid arthritis	Temporary (await NICE)	February 2020	Grey



## Appendix 2 Formulary and guidelines subgroup

From April 2019 to March 2020, 18 policy statements, seven prescribing guidelines, nine formulary chapter reviews and 37 formulary amendment recommendations were taken through the APC process and recommended to CCGs.

Policy statements	APC	RAG rating
DOSULEPIN capsules and tablets	April 2019	Black
TRIMIPRAMINE capsules and tablets (Surmontil®)	April 2019	Black
GLIPTINS (Dipeptidylpeptidase-4 [DPP-4] inhibitors)	April 2019	Green
TOLVAPTAN tablets (Samsca®) for the treatment of hyponatraemia secondary to the syndrome of inappropriate antidiuretic hormone secretion (SIADH)	May 2019	Red
RUBEFACIENTS (excluding topical NSAIDS and capsaicin)	June 2019	Black
ITRACONAZOLE for allergic bronchopulmonary aspergillosis	June 2019	Amber retained
POSACONAZOLE (Noxafil®) or VORICONAZOLE (VFEND®) for allergic bronchopulmonary aspergillosis	June 2019	Black
RITUXIMAB (Truxima®▼, Rixathon®▼) for immune (idiopathic) thrombocytopenic purpura	June 2019	Red
THYROID extracts, desiccated (e.g. Armour Thyroid®) for the management of hypothyroidism - updated	July 2019	Black
FLASH GLUCOSE MONITOR (FreeStyle Libre®) - updated	July 2019	Amber initiated
CICLOSPORIN 1mg/mL eye drops (Verkazia®) for the treatment of severe vernal keratoconjunctivitis (VKC) in children from 4 years of age and adolescents	Sept 2019	Amber retained
AZITHROMYCIN oral liquid and tablets – paediatric use - updated	Oct 2019	Amber retained
CALCIPOTRIOL 50 micrograms and BETAMETHASONE 500 micrograms per 1 gram cutaneous foam (Enstilar®) for psoriasis vulgaris in adults - updated	Oct 2019	Green
BRONCHIECTASIS (non-cystic fibrosis), nebulised antibiotics	Nov 2019	Amber retained

Policy statements	APC	RAG rating
FreeStyle Optium® blood glucose and FreeStyle Optium® β-ketone test strips	Jan 2020	Amber recommended
EFLORNITHINE 11.5% Cream (Vaniqa®) for hirsutism - updated	Jan 2020	Black
ALISKIREN tablets (Rasilez®) for Hypertension	Jan 2020	Black
MINOCYCLINE for acne	Jan 2020	Black

Formulary chapter reviews	APC
Formulary Ch.1 (Gastroenterology) - to incorporate Wirral	April 2019
Formulary Ch.9 (Nutrition and blood) - incl. to incorporate Wirral	July 2019
Formulary Ch. 2 (Cardiovascular) - to incorporate Wirral	Sept 2019
Formulary Ch.7 (Obstetrics, Gynaecology, and urinary-tract) - incl. to incorporate Wirral	Sept 2019
Formulary Ch.10 (Musculoskeletal) - incl. to incorporate Wirral	Oct 2019
Formulary Ch.4 (CNS) - to incorporate Wirral	Oct 2019
Formulary Ch. 11 (Eye) - to incorporate Wirral	Jan 2020
Formulary Ch. 13 (Skin) - to incorporate Wirral	Jan 2020
Formulary Ch. 6 (Endocrine) - to incorporate Wirral	Jan 2020

Guidelines	APC
Overactive bladder in children guideline - updated	April 2019
Blood glucose meters guideline	May 2019
Testosterone therapy guideline	June 2019
Asthma guideline paediatric - updated	June 2019
Multi-compartment compliance aids (Blister pack) guideline	July 2019
Biologics in patients with flare of active inflammatory arthritis during pregnancy	Sept 2019

<b>Guidelines</b>	<b>APC</b>
IBD biologics guideline	Feb 2020

<b>Formulary amendments</b>	<b>APC</b>
37 formulary amendments (e.g. formulation changes, RAG rating changes, additional criteria/ advice)	April 2019 - March 2020

## Appendix 3 Shared care subgroup

From April 2019 to March 2020, two new prescribing support documents and five reviewed documents plus two RAG rating reviews and an extension to the expiry date of five documents were completed through APC with recommendations to CCGs.

Topic	Type of guidance	APC	RAG rating
Sodium valproate	RAG rating	May 2019	Amber retained
Degarelix review	Prescribing support information	May 2019	Amber retained
Riluzole update	Shared care Framework	September 2019	Purple
Methotrexate update	Shared care Framework	September 2019	Purple
Lithium RAG rating for children	RAG rating	September 2019	Red
Apomorphine review	Prescribing support information	November 2019	Amber retained
Gonadorelin analogues update	Prescribing support information	November 2019	Amber retained
Amiodarone	Prescribing support information	November 2019	Amber retained
Ursodeoxycholic acid	Prescribing support information	January 2020	Amber retained
ADHD expiry extension to May 2020	Shared care Frameworks	January 2020	Purple

## Appendix 4 Safety subgroup

From April 2019 to March 2020 the safety subgroup published one new safety statement, updated two existing statements, performed one formulary update, and developed and published one drug safety supplement.

Topic	Type of guidance	APC
INSULIN: reducing errors in prescribing and administration	Update of an existing document	May 2019
Medicines require extra care when switching between liquid and tablet/capsule formulations.	Formulary update	May 2019
SUMMARY CARE RECORD: minimising harm from missing data	New safety statement	July 2019
Drugs requiring contraception	New format drug safety supplement	September 2019
Insulin Comparison and Identification Guide	Update of an existing document	September 2019

## Appendix 5 Antimicrobial review group

Working at scale, the Cheshire and Merseyside antimicrobial review group completed a review of in two parts. Part A has been through the APC consultation process part B is ready for consultation.

Topic	Type of guidance	APC
43 recommendations in six chapters: upper respiratory tract, lower respiratory tract, urinary tract, meningitis, gastrointestinal, and suspected dental infections.	Review and merger of existing formularies	Consultation complete. APC date to be confirmed.
44 recommendations in three chapters: genital tract, skin and soft tissue, and eye infections	Review and merger of existing formularies	Ready for consultation. APC date to be confirmed.

## Appendix 6 NICE technology appraisals

From April 2019 to March 2020, 15 policy statements for CCG-commissioned NICE TAs were produced by the new medicines subgroup and taken through APC with recommendations to CCGs.

Technology appraisal title	APC	RAG rating
TA574: Certolizumab pegol for treating moderate to severe plaque psoriasis	May 2019	Red
TA575: Tildrakizumab for treating moderate to severe plaque psoriasis	May 2019	Red
TA583: Ertugliflozin with metformin and a dipeptidyl peptidase-4 inhibitor for treating type 2 diabetes	June 2019	Green
TA590: Fluocinolone acetonide intravitreal implant for treating recurrent non-infectious uveitis	September 2019	Red
TA596: Risankizumab for treating moderate to severe plaque psoriasis	September 2019	Red
TA599: Sodium zirconium cyclosilicate for treating hyperkalaemia	September 2019	Red
TA597: Dapagliflozin with insulin for treating type 1 diabetes	October 2019	Temporary Red
TA605: Xeomin (botulinum neurotoxin type A) for treating chronic sialorrhoea	October 2019	Red
TA607: Rivaroxaban for preventing atherothrombotic events in people with coronary or peripheral artery disease	November 2019	Green
TA610: Pentosan polysulfate sodium for treating bladder pain syndrome	November 2019	Red
TA613: Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema in phakic eyes after an inadequate response to previous therapy	January 2020	Black
TA617: Lusutrombopag for treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure	January 2020	Red
TA597: Dapagliflozin with insulin for treating type 1 diabetes	February 2020	Amber Retained (replaced temporary Red)

Technology appraisal title	APC	RAG rating
TA623: Patiromer for emergency treatment of hyperkalaemia	March 2020	Red
TA623: Patiromer for persistent hyperkalaemia	March 2020	Amber Initiated

For NICE TAs where CCGs are not the responsible commissioner, a hyperlink to the NICE TA is added to the appropriate section of the Pan Mersey joint formulary.

A monthly overview of all NICE TAs is produced by the MLCSU hub team and noted at each APC meeting to provide assurance around compliance with NICE TA statutory requirements.



## Appendix 7 Attendance at APC meetings

Nine APC meetings were held in 2019-20.

Organisation	Meetings attended
Aintree University Hospitals NHS Foundation Trust (Liverpool University Hospitals Foundation Trust from October 2019)	9
Bridgewater Community Healthcare NHS Foundation Trust	8
Alder Hey Children's NHS Foundation Trust	7
Liverpool Women's NHS Foundation Trust	0
Liverpool Heart and Chest Hospital NHS Foundation Trust	9
Royal Liverpool and Broadgreen Hospitals NHS Trust (Liverpool University Hospitals Foundation Trust from October 2019)	9
Mersey Care NHS Foundation Trust	2
Mersey Care Liverpool and South Sefton Community Services Division	9
North West Boroughs Healthcare NHS Foundation Trust	7
Southport and Ormskirk NHS Hospital NHS Trust	6
St Helens and Knowsley Teaching Hospitals NHS Trust	8
Warrington and Halton Hospitals NHS Foundation Trust	8
Wirral University Teaching Hospital NHS Foundation Trust	9
NHS Halton CCG	9
NHS Knowsley CCG	9
NHS Liverpool CCG	9
NHS Southport and Formby CCG	9
NHS South Sefton CCG	9
NHS St Helens CCG	8
NHS Warrington CCG	9
NHS West Lancashire CCG	6
NHS Wirral CCG	9

<b>Organisation</b>	<b>Meetings attended</b>
Lancashire Care NHS Foundation Trust	5
Cheshire and Wirral Partnership NHS Foundation Trust	1
Liverpool Local Medical Committee	5
Mid Mersey Local Medical Committee	2
Wirral Local Medical Committee	1

Specialist Trusts are only required to attend APC meetings when there are relevant agenda items.