

## Norfolk and Waveney Therapeutics Advisory Group (TAG)

### Report of Activities - April 2023 to March 2024

The role of the Therapeutics Advisory Group (TAG) is to provide informed, professional advice across Norfolk and Waveney on the clinical use of medicines, dressings and other prescribable items that are commissioned by the ICB. This includes:

- advice on the managed introduction and implementation of new medicines and indications into practice – including on the most appropriate method of introducing medicines recommended by NICE
- advice on the prescribing responsibility across the Primary / Secondary care interface
- advice on non-medical prescribing issues and PGDs, where appropriate
- to take note of commissioning decisions made by other commissioners, for example NHS England and neighbouring ICBs

The TAG is an **Advisory committee**. All recommendations must be discussed further at the Drug and Therapeutics Committee before final ratification by the Planned Care and Medicines Management Working Group (**Appendix 1 – Ratification Process**)

TAG recommendations, prescribing guidelines and formularies are published on 2 interactive websites – [Knowledge NoW](#) and [Netformulary](#)

Information published on these websites is regularly updated and is used to support our primary and secondary care clinicians and their patients when making prescribing decisions.

### Key Achievements from April 2023 to March 2024

#### 1. TAG meetings

TAG meetings are held monthly via Microsoft Teams, usually on the first Wednesday of the month. Dates and times of meetings are set on an annual basis but are under continued review. A small number of TAG meetings have been cancelled over this period due to the ICB restructure and additional work pressures.

**From April 2023 to March 2024 there were 7 meetings.**

TAG members represent the following organisations:

- East Coast Community Healthcare CIC
- James Paget University Hospital NHS Foundation Trust
- Norfolk and Norwich University Hospital NHS Foundation Trust
- Norfolk and Suffolk NHS Foundation Trust
- Norfolk and Waveney ICB
- Norfolk and Waveney Local Medical Committee
- Norfolk Community Health and Care NHS Trust
- Public Health England (Norfolk County Council)
- Queen Elizabeth Hospital, King's Lynn NHS Foundation Trust

#### 2. TAG Recommendations

- **2023-24 – 304 recommendations ratified by the Planned Care and Medicines Management Working Group**

	Formulary applications, pathways, commissioning reviews and prescribing guidance	NICE Guidance and Technology Appraisals	Interface issues, Shared Care Agreements, Prescribing reference group, local PGDs and miscellaneous guidance	East of England Priorities Advisory Committee (EoE PAC) policies and Regional Medicines Optimisation Committees (RMOCs)
<b>Total</b>	<b>92</b>	<b>141</b>	<b>69</b>	<b>2</b>

Recommendations have been recorded and published in the TAG section on [Knowledge NoW](#)

### 3. TAG Update Newsletters and Medicines Optimisation Updates

- [TAG Update newsletter](#) was developed in 2020 and 29 editions have now been published. This newsletter lists the recommendations and commissioning decisions that had been ratified by the ICB following TAG and D+TC meetings.
- The Norfolk and Waveney Prescriber was retired in 2020. Updates from the Medicines Optimisation team in areas covering prescribing, care homes and medicine safety are now published in the news feed section of [Netformulary](#), the online formulary platform for Norfolk and Waveney, and on the new [Knowledge NoW](#) website

In addition to being published on Knowledge Anglia, these newsletters are widely circulated to prescribers and healthcare practitioners in primary and secondary care across the local health economy.

### 4. Additional achievements

- Update and transfer of all Prescribing and Medicines Optimisation documents to new [Knowledge NoW](#) platform
- Addition and continued update of [Netformulary](#) to support and guide local prescribing
- Review and update of traffic light classifications ([Appendix 2](#))
- New and routine updates to existing shared care agreements and prescribing guidance documents ([Appendix 3](#))
- Support to Antimicrobial Stewardship Group by ensuring our antimicrobial guidelines are frequently reviewed and updated in line with national guidance and local resistance patterns.
- Support to Quality, Innovation, Productivity and Prevention (QIPP) agenda by:
  - Maintaining the Norfolk and Waveney formulary to ensure an accessible resource for prescribers
  - Undertaking horizon scanning activities to guide prescribers on new medicines/licenced indications ([see Appendix 4 for highest identified financial risk for the coming months](#))
  - Continued adherence to the ICB financial mandate thresholds.
- Keeping up to date with the work of the Regional Medicines Optimisation Committees ([RMOCs](#)) and East of England Priorities Advisory Committee ([PAC](#) – [may need an account to access](#)) and adapting our local guidance where appropriate

### Future Priorities

The health community has come together into a formal Integrated Care Board (ICB). The committee has adapted and reflected on membership, commissioning and reporting. The TAG will continue to prioritise workload to ensure engagement is still maintained from members who may be required to support additional roles. During this time, the TAG will continue to utilise Microsoft Teams and remote working.

We will also:

- Encourage and support patient and public Involvement in reviewing new medicines, revising treatment pathways and creating local formularies
- Continue to monitor the work of PAC and RMO
- Assess the needs of the Integrated Care Board (ICB) and Primary Care Networks (PCNs) locally and adapt accordingly
- Maintain good membership
- Maintain a current and user-friendly formulary and continue to promote its content
- Continue to maintain relevant and up-to-date medicines guidance for use across Norfolk and Waveney

### Summary

The Norfolk and Waveney Therapeutics Advisory Group (TAG) continues to function through challenging circumstances to provide robust recommendations on the safe, clinical and cost-effective use of medicines to the Norfolk and Waveney ICB for the benefit of the local population.

TAG meetings have generally been well attended across the membership.

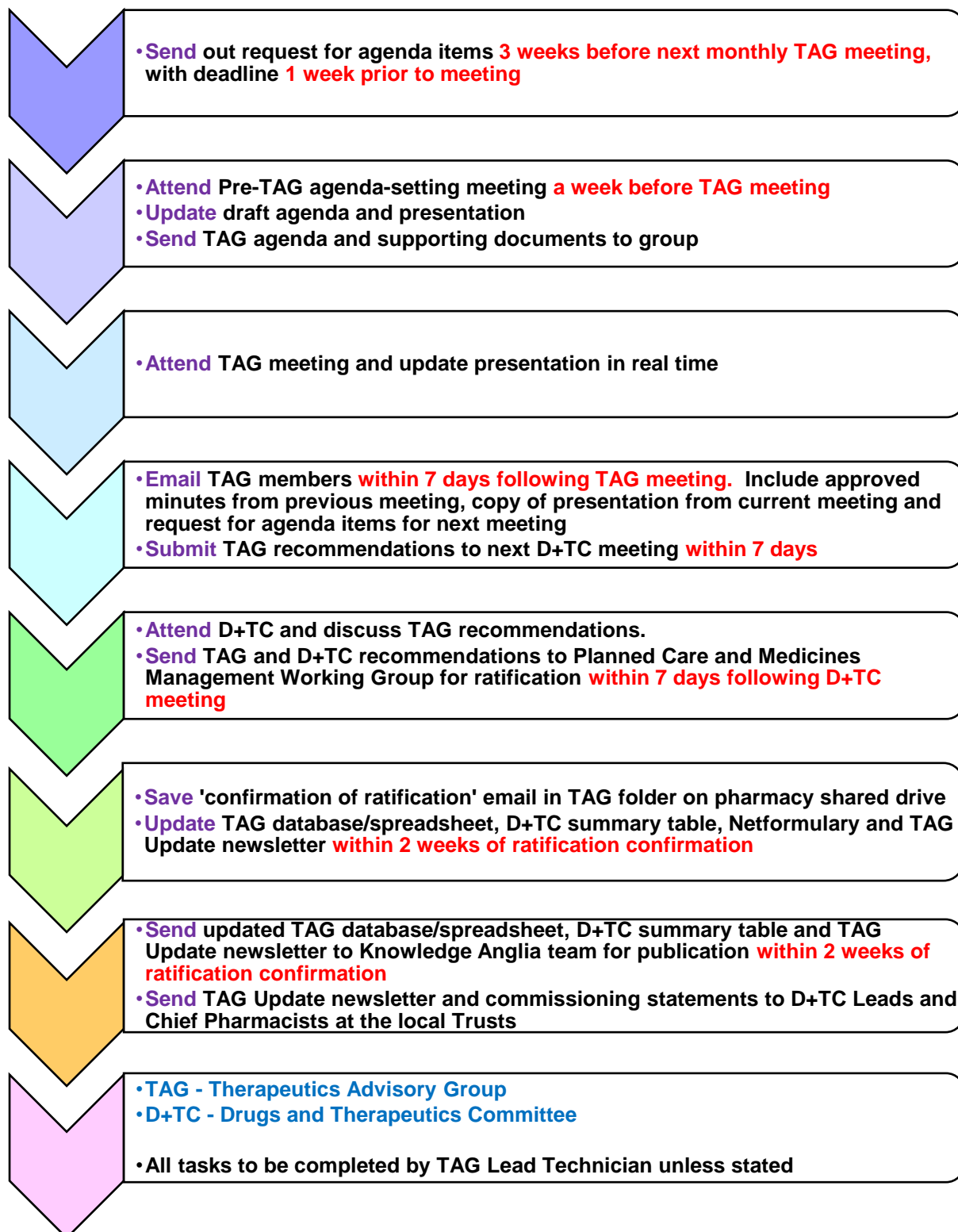
The meetings of the TAG will continue to provide an important local forum for interactions that help to facilitate and maintain good working relations across several healthcare sectors.

It is hoped that this report is helpful to all interested parties.

**Any comments on this document are welcomed by the TAG Lead Technician. Contact details are below:**

**Email:** [nwicb.medsqueries@nhs.net](mailto:nwicb.medsqueries@nhs.net) with **TAG report** in the subject line

## Appendix 1 - TAG process for ratification of formulary applications and guidance (April 2023-March 2024)



## Appendix 2 – Updated Traffic Light Classifications

<b>BLACK</b>	<b>Not commissioned. No NHS prescribing in primary or secondary care</b> This category covers those products that are not commissioned and therefore should not be prescribed in primary or secondary care
<b>BLUE</b>	<b>NWICB are committed to fund positive NICE TA treatments. Awaiting clarification of place in pathway and commissioning arrangements. Further guidance will be issued when available. For all other treatments, formulary application and discussion will be required.</b> This category includes new products on the Horizon Scanning list, those medications and devices which have not yet been reviewed, and newly published NICE TAs with ICB-commissioned responsibility.
<b>Double Red</b>	<b>Not recommended for routine use</b> To be used only as a last resort in exceptional circumstances such as transfer of care, patient moving from out of area, or where other treatment or pathway options have been exhausted. Seek advice from Medicines Optimisation Team where appropriate. Some items may require formal approval via the IFR process.
<b>Hospital</b>	<b>Restricted use – Prescribing to remain with the hospital or specialist service. No prescribing in primary care</b> Includes acute and mental health trusts and other specialist commissioning services
<b>AMB</b>	<b>Shared Care Agreement Level 0</b> Prescribe the drug and perform a basic level of monitoring, e.g. annual review / administration
<b>AMB 1</b>	<b>Shared Care Agreement Level 1</b> Prescribe the drug and perform a higher level of monitoring, e.g. 6-monthly
<b>AMB 2</b>	<b>Shared Care Agreement Level 2</b> Prescribe the drug and perform a more intense level of monitoring, e.g. quarterly
<b>AMB 3</b>	<b>Shared Care Agreement Level 3</b> Prescribe the drug and perform significant monitoring including measurements such as height, weight, blood pressure and ECG, e.g. drugs requiring monthly monitoring
<b>ADVICE</b>	<b>Formulary - Specialist advice required from primary or secondary care clinician with relevant expertise prior to primary care initiation</b> Treatment can be initiated in primary care following advice or recommendation from clinician in primary or secondary care with relevant expertise
<b>GREEN</b>	<b>Formulary - Drugs that can be initiated by Prescriber in Primary Care</b> This covers most drugs on the primary care formulary
<b>SWITCH</b>	<b>Not recommended for prescribing. Switch to cost-effective alternative</b> This category will act as a reminder of the cost-effective switches and will be reviewed monthly
<b>NF</b>	<b>Non-formulary</b> Products that don't appear on our current local formularies. To be reviewed regularly
<b>OTC</b>	<b>Available to buy over the counter. Consider self-care</b> Drugs in this category will be available to buy over the counter.
<b>MIXED</b>	<b>Drugs that have more than one traffic light classification</b> The 'mixed' classification will appear in the summary header for drugs that have multiple classifications, although individual traffic lights will be allocated as per specific indication.
<b>YELLOW</b>	<b>Drugs that are commissioned by Public Health England</b> Examples include weight management, nicotine replacement therapy and substance abuse services
<b>DM</b>	<b>Discontinued Medicines</b> This category will be under constant review and updated regularly

### Appendix 3 – Current Shared Care Agreements for use across Norfolk and Waveney

Shared Care Agreements – see full list on <a href="#">Knowledge NoW</a>
<a href="#">ADHD treatment for adults</a>
<a href="#">ADHD Atomoxetine in children and adolescents</a>
<a href="#">ADHD Stimulants for children and adolescents</a>
<a href="#">Amiodarone – use in adult services</a>
<a href="#">Anagrelide for Thrombocythaemia</a>
<a href="#">Azathioprine for use in autoimmune diseases</a>
<a href="#">Azathioprine for ulcerative colitis and crohns</a>
<a href="#">Ciclosporin in treatment of rheumatic and dermatological diseases</a>
<a href="#">Cinacalcet for primary hyperparathyroidism</a>
<a href="#">Colistin (nebulised) for bronchiectasis (non c-f)</a>
<a href="#">Darbepoetin - treatment of anaemia in chronic kidney disease AND unable to attend specialist centre</a>
<a href="#">Dementia drugs for treatment of alzheimers and dementia with lewy body diseases</a>
<a href="#">Denosumab for treatment of osteoporosis in post-menopausal women at increased risk of fractures</a>
<a href="#">Dronedarone for non-permanent AF</a>
<a href="#">Guanfacine - adult services</a>
<a href="#">Hydroxycarbamide</a>
<a href="#">Leflunomide in treatment of rheumatoid or psoriatic arthritis</a>
<a href="#">LHRH Agonist treatment in gynaecology</a>
Low molecular weight heparin – currently unavailable as under review
<a href="#">Melatonin for Sleep Disorders in Children</a>
<a href="#">Mercaptopurine in ulcerative colitis and crohns</a>
<a href="#">MTX - oral and s/c - for treatment of rheumatoid arthritis, psoriasis and IBD</a>
<a href="#">Mycophenolate for solid organ transplant patients</a>
<a href="#">Mycophenolate mofetil for use as an immunosuppressive agent in treatment of connective tissue disease and other autoimmune conditions</a>
<a href="#">Naltrexone for abstinence in alcohol use disorder</a>
<a href="#">Riluzole for treatment of amyotrophic lateral sclerosis form of MND</a>
<a href="#">Sacubitril valsartan for treating symptomatic chronic heart failure with reduced ejection fraction</a>
<a href="#">Sirolimus for solid organ transplant patients</a>
<a href="#">Sulfasalazine for inflammatory arthritis and IBD</a>
<a href="#">Tacrolimus for solid organ transplant patients</a>
<a href="#">Tacrolimus for ulcerative colitis</a>
<a href="#">Testosterone Therapy for Boys in Infancy and Adolescence</a>
<a href="#">Triptolein for treatment of precocious puberty, menorrhagia and dysmenorrhoea in children</a>

## Appendix 4 - Horizon Scanning - Highest identified financial risks in coming months

Risk level	Financial risk (lower band)	Financial risk (Median)	Financial risk (upper band)	ETA (Date sort)	Generic drug name	Therapy area	Primary / Secondary care	NICE
High >£250k per annum	£1,860,950.00	£2,791,430.00	£3,721,910.00	Aug-24	Lecanemab	Alzheimer's disease	Secondary care	July 2024
High >£250k per annum	£1,860,950.00	£1,860,950.00	£1,860,950.00	Nov-24	Donanemab	Alzheimer's disease	Secondary care	TBC
High >£250k per annum	£848,800.00	£1,273,150.00	£1,697,500.00	May-24	Pegcetacoplan	Geographic atrophy	Secondary care	June 2024
High >£250k per annum	£0.00	£998,890.00	£1,997,780.00	Nov-24	Semaglutide	Obesity	Primary care	TBC
High >£250k per annum	£570,600.00	£855,900.00	£1,141,200.00	May-24	Tirzepatide	Diabetes	Primary care	October 2023
High >£250k per annum	£735,810.00	£735,810.00	£735,810.00	Feb-24	Ritlecitinib	Alopecia	Secondary care	January 2024
High >£250k per annum	£207,410.00	£658,655.00	£1,109,900.00	May-24	Tirzepatide	Obesity	Primary care	March 2024
High >£250k per annum	£456,450.00	£456,450.00	£456,450.00	May-24	Relugolix/ estradiol/ norethisterone	Endometriosis	Primary care	May 2024
High >£250k per annum	£410,810.00	£410,810.00	£410,810.00	Nov-24	Linzagolix	Endometriosis	Secondary care	TBC
Medium >£150k per annum	£244,750.00	£244,750.00	£244,750.00	Feb-24	Budesonide	Glomerulonephropathy	Primary care	January 2024
Medium >£150k per annum	£233,570.00	£233,570.00	£233,570.00	Feb-24	Ruxolitinib	Vitiligo	Secondary care	March 2024
Medium >£150k per annum	£191,000.00	£191,000.00	£191,000.00	Feb-24	Risankizumab	Crohn's disease	Secondary care	May 2023
Low < £150k per annum	£123,000.00	£123,000.00	£123,000.00	Aug-24	Risankizumab	Ulcerative colitis	Secondary care	TBC
Low < £150k per annum	£13,590.00	£98,055.00	£182,520.00	May-24	Atogepant	Migraine	Secondary care	April 2024
Low < £150k per annum	£85,110.00	£85,110.00	£85,110.00	Nov-24	Aprocitan	Hypertension	Primary care	
Low < £150k per annum	-£6,290.00	£46,100.00	£98,490.00	Nov-24	Botulinum toxin type A	Muscle spasticity	Secondary care	TBC
Low < £150k per annum	£2,200.00	£26,580.00	£50,960.00	Nov-24	Insulin icodec	Diabetes	Primary care	TBC
Low < £150k per annum	£25,250.00	£25,250.00	£25,250.00	Aug-24	Faricimab	Retinal vein occlusion	Secondary care	TBC
Low < £150k per annum	£0.00	£24,370.00	£48,740.00	Aug-24	Standardised allergen extract from house dust mites Dermatophagoides pteronyssinus and Dermatophagoides farinae	Allergic rhinitis	Primary care	TBC
Low < £150k per annum	£3,900.00	£3,900.00	£3,900.00	May-24	Netarsudil + latanoprost	Glaucoma	Primary care	May 2024
Low < £150k per annum	£2,700.00	£2,700.00	£2,700.00	Feb-24	Apomorphine	Parkinson's	Primary care	Topic not prioritised
Low < £150k per annum	-£680.00	£1,150.00	£2,980.00	May-24	Linzagolix	Uterine fibroids	Primary care	April 2024
Cost neutral/Saving	£0.00	£0.00	£0.00	May-24	Somapacitan	Growth hormone deficiency	Secondary care	TBC
Cost neutral/Saving	£0.00	£0.00	£0.00	Aug-24	Aztreonam/ avibactam	Bacterial infection	Secondary care	
Cost neutral/Saving	£0.00	£0.00	£0.00	Sep-24	Cefepime/ enmetazobactam	Bacterial infection	Secondary care	
Cost neutral/Saving	£0.00	£0.00	£0.00	Mar-24	Buprenorphine	Opioid dependence	Primary care	
Cost neutral/Saving	-£620.00	-£620.00	-£620.00	Nov-24	Bevacizumab	Wet age-related macular degeneration	Secondary care	TBC
Cost neutral/Saving	-£5,830.00	-£5,830.00	-£5,830.00	Aug-24	Abaloparatide	Osteoporosis	Primary care	TBC
Cost neutral/Saving	-£16,200.00	-£16,200.00	-£16,200.00	Nov-24	Adrenaline	Anaphylaxis	Primary care	
Cost neutral/Saving	-£28,320.00	-£28,320.00	-£28,320.00	Nov-24	Vibegron	Overactive bladder	Primary care	TBC
Cost neutral/Saving	-£51,500.00	-£51,500.00	-£51,500.00	Feb-24	Etrasimod	Ulcerative colitis	Secondary care	February 2024
Cost neutral/Saving	-£373,750.00	-£56,065.00	£261,620.00	Aug-24	Lebrikizumab	Atopic dermatitis	Secondary care	TBC