

## Clinical Effectiveness and Medicines Management Group (CEMMAg) Annual Report for 2011/12

### 1. Introduction

The Clinical Effectiveness and Medicines Management Group (CEMMAg) leads on the development of primary care medicines management policies, referral pathways, commissioning policies and clinical guidelines for Wandsworth. The group, which is chaired by Dr Rod Ewen, also oversees the implementation of NICE guidance both within Wandsworth PCT and in our main providers, namely St George's Healthcare NHS Trust (including acute and community services), and SW London Mental Health NHS Trust. The broad functions of CEMMAg as noted above are essential for demonstrating sound clinical governance and for supporting evidence-based, cost and clinically effective commissioning, PH and clinical practice irrespective of commissioning arrangements. In addition, the group promotes joint working to support the implementation of wide-ranging PH guidance that requires joint implementation by the NHS, Wandsworth Local Authority and other strategic partners. This report summarises the activities and achievements of the group from April 2011 to September 2012, and outlines planned developments for 2012-13 and beyond.

### 2. Aims

The Clinical Effectiveness and Medicines Management Group supports the development of evidence-based decision making, policy making, and guideline development in NHS Wandsworth Clinical Commissioning Group (WCCG). In this way CEMMAg hopes to support the commissioning of services that meet local need, are evidence based and are consistent with national guidance, service frameworks and best practice. The Group supports continuous improvement in and high standards of clinical practice in all contracted and commissioned services. CEMMAg seeks to achieve its aims by:

- Developing and approving medicine management policies and guidelines in conjunction with primary and secondary care clinicians (See Appendix 1)
- Providing WCCG with an expert resource on the effectiveness and safety of health service interventions (including drugs, devices and procedures).
- Leading on the implementation of best practice (including NICE guidance) in contracted services such as GP and GDP
- Monitoring the implementation of best practice (including NICE guidance) in host provider units for acute, community and mental health services
- Supporting the development of, and reviewing and approving, evidence-based policies, clinical guidelines and care pathways developed by local groups within Wandsworth (See Appendix 1)
- Supporting the development, review, approval and implementation of Patient Group Directions (PGDs) (See Appendix 1)

- Assisting with the dissemination of best practice, including NICE guidance and approved local guidelines and care pathways
- Undertaking service reviews
- Promoting sound research management and governance practices
- Auditing of services to ensure compliance with NICE and other clinical and best practice standards
- Implementing improvement plans

### **3. Revised Terms of Reference**

Over the past year, CEMMaG has taken on some new responsibilities, and now plays a key role in developing, reviewing, approving and implementing Patient Group Directions (PGDs) on behalf of WCCG. This role will expand to encompass the joint development of PGDs for use by Community Services Wandsworth as part of Planning All Care Together (PACT), and providing out of hospital services.

In addition, to execute its duties in supporting clinical governance and promoting quality of commissioning, medicines management and clinical practice, the CCG will need to support an organization-wide process that ensures clinical guidelines, policies and pathways developed across the organization require CEMMaG approval before implementation.

As a result of the above, the increased workload coupled with the need for a faster turnaround for the approval of such guidelines, care pathways, etc., means that it will be necessary to increase the frequency of meetings from quarterly to monthly.

To reflect these changes, CEMMaG's Terms of Reference have been extensively revised, and are attached as Appendix 2.. The main changes made compared to the previous version are:

1. CEMMaG now report to WCCG Integrated Governance Committee
2. The ToR now includes the role of CEMMaG in developing, reviewing, approving and implementing Patient Group Directions (PGDs)
3. Expanded membership to include GP representatives from each locality
4. Increase frequency of meeting from quarterly to monthly
5. Support to Clinical Reference Groups and localities through review of pathways, specification and guidelines developed

The health improvement function of Public Health will come under the remit of Local Authorities from April 2013. The Public Health department already engages with local services which impact on the wider determinants of health such as education, social services, transport, and housing. In this context, CEMMaG has expanded its membership to include a representative from Wandsworth Borough Council (see point 3 above).

### **4. Implementation of NICE Guidance in 2011/12**

CEMMaG has a policy for implementation of NICE guidance, and the CEMMaG meeting plays a key role in overseeing this process. The elements of this process include:

- Preparing regular NICE Update reports which summarise for each piece of guidance: recommendations; whether the guidance affects GPs, community services, and/or

secondary care; cost implications; and specifying the organisation, group or individual responsible for overseeing baseline assessment and/or implementation.

- NICE guidance summarised in the NICE Update includes: Technology Appraisals (TAs); Clinical Guidelines (CGs); Public Health guidelines (PH); Medical Technology Guidance (MTGs) and Diagnostic Technology Guidance (DTGs).
- The NICE Update report is circulated to the Integrated Governance Committee for information.
- Information on newly-issued NICE guidance is a key element of the monthly Primary Care Clinical Effectiveness Bulletin (see below), which promotes the implementation of NICE guidance in primary care.
- NHSW public health staff are requested and encouraged to lead in carrying out a baseline assessments in relation to any new NICE PH guidance relevant to public health.
- Completed baseline assessments are presented at the next CEMMaG meeting where any gaps in local provision can be highlighted and action plans developed

CEMMaG also has a role in overseeing NICE Implementation in local provider units for whom NHSW is the host commissioning body. This included St George's Healthcare NHS Trust (for acute and community services) and SW London and St George's Mental Health NHS Trust. These Local providers are encouraged to feedback to CEMMaG information on their implementation audits, actions and plans in relation to the NICE guidance relevant to their functions. Representatives of these provider units are requested to present regular reports on the status of NICE implementation at the CEMMaG meeting (See Appendix 3).

## 5. The evolving remit of NICE

This period has seen some significant changes to the role and remit of NICE as a result of government policy and in relation to evolving programmes of guidance production.

### 5.1 NICE Care Pathways

NICE have continued to develop care pathways relating to the management of an expanding range of diseases and conditions. This online tool provides quick and easy access, topic by topic, to the range of guidance from NICE, including quality standards, technology appraisals, clinical and public health guidance and NICE implementation tools. It is designed to be simple to navigate, and allows the user to explore in increasing detail NICE recommendations and advice, giving the user confidence that they are up to date with everything NICE has recommended. Visually representing everything NICE has said on a particular topic, the pathways enable the user to see at a glance all of NICE's recommendations on a specific clinical or health topic. They provide an easier and more intuitive way to find, access and use NICE guidance. NICE pathways represents a network of NICE information. For example, the diet pathway links up with the physical activity pathway; the COPD pathway links up with the smoking pathway. Over time, all of NICE's guidance, quality standards and related tools will be added to this network of information. The user does not need to understand how NICE classifies different types of guidance to view everything NICE has said on a particular topic.

### 5.2 NICE Quality Standards

NICE quality standards are a concise set of statements designed to drive and measure priority quality improvements within a particular area of care. NICE quality standards are derived from the best available evidence such as NICE guidance and other evidence sources accredited by NICE. They are developed independently by NICE, in collaboration with NHS and social care professionals, their partners and service users. Evidence relating to effectiveness and cost effectiveness, people's experience of using services, safety issues, equality and cost impact are considered during the

development process. NICE quality standards are central to supporting the Government's vision for an NHS and Social Care system focussed on delivering the best possible outcomes for people who use services, as detailed in the Health and Social Care Act (2012). NICE quality standards enable:

- Health and social care professionals and public health professionals to make decisions about care based on the latest evidence and best practice.
- People receiving health and social care services, their families and carers and the public to find information about the quality of services and care they should expect from their health and social care provider.
- Service providers to quickly and easily examine the performance of their organisation and assess improvement in standards of care they provide.
- Commissioners to be confident that the services they are purchasing are high quality and cost effective and focussed on driving up quality.

NICE is developing quality standards both for the NHS and for social care. Quality standards for the NHS focus on the treatment and prevention of different diseases and conditions. Quality standards for the NHS will be reflected in the new Commissioning Outcomes Framework and will inform payment mechanisms and incentive schemes such as the Quality and Outcomes Framework (QOF) and Commissioning for Quality and Innovation (CQUIN) Payment Framework. In March 2012, the Department of Health referred a library of quality standard topics for the NHS to NICE for development. [The full list can be found here.](#) The Health and Social Care Act 2012 sets out a new responsibility for NICE to develop quality standards and other guidance for social care in England. In order to prepare for taking on this new role in April 2013, the Department of Health has asked NICE to run a pilot programme for developing social care quality standards using two topics:

- Care of people with dementia
- Health and wellbeing of looked-after children and young people

### **5.3 NICE support to GPs clinicians and commissioning consortia**

NICE has set up a programme to help support implementation of NICE guidance. The implementation team works alongside the guideline developers, the communications team and field based teams to:

- ensure intelligent dissemination to the appropriate target audiences
- actively engage with the NHS, local government and the wider community
- work nationally to encourage a supportive environment
- provide tools to support putting NICE guidance into practice
- demonstrate significant cost impacts - either costs or savings at local and national levels
- evaluate uptake of NICE guidance
- share learning
- develop educational material to raise awareness of NICE guidance and encourage people to input into its development

NICE also produces materials and tools to support the commissioning of services. Commissioning guides are topic-specific, web-based resources. Each commissioning guide comprises a series of text-based web pages that signpost and provide topic-specific information on key clinical and service-related issues to consider during the commissioning process. Each guide contains a commissioning and benchmarking tool, which is a resource that can be used to estimate and inform the level of service needed locally as well as the cost of local commissioning decisions. NICE has published commissioning guides for implementing NICE guidance for topics ranging from End of Life Care to bariatric surgery service

## 6. Cost of implementing NICE guidance

An attempt is made here to reflect net costs to NHS Wandsworth of fully implementing NICE Technology Appraisals and Clinical Guidelines.

The estimate for Technology Appraisals is based on NICE costing templates, and where these are not available, on NICE costing statements. Costing templates provide a complex multi-factor costing model, with the possibility of varying some parameters to reflect local circumstances. As NICE considers that full implementation for some drugs or technologies will not take place immediately, estimates for the final financial impact of implementation are given where appropriate. Accordingly, the NICE Guidance issued between October 2011 and Sept 2012 (NB using final recurring costs), if fully implemented would result in net cost of around £1.2 millions (£1,197,778) to Wandsworth PCT. This aggregate estimate is based on the costs of treating the population of Wandsworth.

For Clinical Guidelines the costs of implementation for Wandsworth are even more uncertain, as local practice may vary widely, and recommendations may already be implemented in some areas. For many Clinical Guidelines NICE provide a costing template, but state that local experts should input their own assumptions into the template, rather than generating a local total cost based on a figure for the local population. For this reason, a total value for the implementation of CGs is of such poor accuracy as to be of very little practical value. However, when estimated net annual implementation costs are totalled across 24 clinical guidelines the figure yielded is approximately £1.4 millions (£1,354,278).

## 7. Primary Care Clinical Effectiveness Bulletins

Primary Care Clinical Effectiveness (PCCE) Bulletins are distributed electronically each month. They are sent by e-mail to each practice manager, who is requested to forward electronic or paper copies to the clinical staff at the GP practice. These Bulletins summarise useful information regarding aspects of effective clinical practice in primary care. This includes local prescribing guidance and care pathways as well as national clinical guidelines and other guidance, as well as other news on clinical effectiveness issues relevant to primary care. Wherever possible the electronic bulletin contains hyperlinks so that the reader can click to directly access further information and/or guidance documents e.g. via the NICE website). Copies of the PCCE Bulletin are passed to the WCCG Integrated Governance Committee.

## 8. Effective Commissioning Initiative

The [Effective Commissioning Initiative](#) (ECI) was developed by the South West London Public Health Network and provides a set of patient criteria to inform the commissioning of surgical interventions in South West London. This work is driven by the need to ensure that NHS-funded treatments are effective and evidence-based. It also attempts to define more clearly and openly the limits of NHS funding for procedures with social but not physical benefits e.g. cosmetic procedures. Although not the main driving force, it is also linked to the need to ensure that the NHS provides value for money and achieves financial balance. The current proposals can broadly be classified into four groups:

- Procedures with limited evidence of effectiveness.
- Procedures where initial conservative therapy is possible.
- Effective procedures where a threshold for intervention may be appropriate.
- Procedures where NHS provision may be inappropriate.

Since May 2012 patient information leaflets are in the process of being developed. The aim is to make these available to patients both on-line and via the patient's GP. These leaflets provide a concise and easy to understand summary of each surgical intervention covered by the ECI policy, together with an explanation of the criteria for surgery and the reasons for having such criteria.

## **9. CEMMaG Web Pages**

The [CEMMaG Web Pages](#) were expanded and updated during 2010, as described in the previous annual report. However the Wandsworth PCT website which hosted the CEMMaG web pages was migrated to the NHS South West London website in 2011. Although all of the reports, policies and bulletins local guidelines and care pathways were migrated to the new site, some other content was lost (e.g. text describing CEMMaG), and moreover there was no designated staff in place to maintain the CEMMaG pages. Since this time the NHSW Clinical Effectiveness Facilitator has gained editing rights and has received training on how to edit the CEMMaG web pages. Ongoing software issues have limited access to the pages and work is needed to bring the CEMMaG web pages up to date. However, access by primary care clinicians to CEMMaG-approved local prescribing and other guidelines has been maintained via SW London Public Health Network website, and the South London Cardiac and Stroke Network Website. It is now a high priority to re-establish and maintain the CEMMaG web pages on the WCCG website.

Alastair Johnston, Clinical Effectiveness Facilitator, December 2012

**APPENDIX 1: Prescribing guidelines, other guidance and care pathways approved by CEMMaG, and monitoring implementation of NICE Guidelines**

Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
SW London – wide Shared Care Prescribing Guideline	Methylphenidate, Dexamfetamine and Atomoxetine for ADHD in patients 6-18 years of age	CEMMaG, 3/3/2011	Nick Beavon	Approved and distributed to Wandsworth GPs. Developed in collaboration with SW London and St Georges Mental Health Trust	Guideline updated for Methylphenidate and Atomoxetine in Sept 2012 – see below.
SW London-wide Shared Care Prescribing Guideline	Somatropin in children with growth failure	CEMMaG, 3/3/2011	Nick Beavon	Approved and distributed to Wandsworth GPs. Developed in collaboration with Epsom and St. Helier University Hospitals NHS Trust, Kingston Hospital NHS Trust, Croydon University Hospital NHS Trust, Royal Marsden Hospital NHS Foundation Trust, St George’s Hospital NHS Trust.	Reflects recommendations from NICE Technology Appraisal No. 188. Available via the SWL PH Network website: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/swl-interface-prescribing-policy-and-appendices/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/swl-interface-prescribing-policy-and-appendices/</a>
Wandsworth Primary Care Prescribing Guideline	Management of Infection Guidance for Primary Care	CEMMaG, 3/3/2011	Nick Beavon	Approved and distributed to Wandsworth GPs. Kept on SWL PH Network website: click on ‘Antibiotic Prescribing Guidelines in Primary Care (March 2011)’	Updated to replace the previous version of primary care prescribing guidelines for the management of infections. <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a>
Wandsworth and Sutton & Merton shared care prescribing guideline	Leflunomide for active Rheumatoid Arthritis and Psoriatic Arthritis in Adults	CEMMaG, 3/3/2011	Nick Beavon	Approved and distributed to Wandsworth GPs. These shared care prescribing guidelines were developed by Epsom and St. Helier University NHS Trust and St. George’s Hospital NHS Trust in collaboration with Sutton & Merton PCT and Wandsworth PCT	Available via the SWL PH Network website under: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/swl-interface-prescribing-policy-and-appendices/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/swl-interface-prescribing-policy-and-appendices/</a>
NHS Wandsworth community pharmacy PGD	Community Pharmacy PGD for varenicline	CEMMaG, 3/3/2011	David Tamby-Rajah	Approved for use as an option for smoking cessation for prescription by community pharmacists.	Community pharmacy PGDs not available via the SWL PH Network website.
NHS Wandsworth and St	Breastfeeding with Thrush leaflet	CEMMaG, 3/3/2011	Mary Boucher	This patient information leaflet was approved for distribution via SGH breastfeeding advisor, community nurses, community pharmacists and	Available on SW London PH Network website – follow hyperlink. <a href="http://swlphnetwork.org.uk/network-">http://swlphnetwork.org.uk/network-</a>



Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
George's Healthcare Trust				GPs	<a href="#">subgroups/pharmacy-subgroup/primary-care-prescribing/</a>
NHS Wandsworth and St George's Healthcare Trust	Prescribing Guidelines of Infant Formula for Infants with Cow's Milk Protein Allergy (CMPA) or Lactose Intolerance	CEMMAg, 3/3/2011	Shaneez Dhani NHSW, Jenny MacLeod SGH	Guidelines intended to improve management of children with suspected CMPA in Primary Care, and reduce expenditure on unnecessary prescriptions	Available on SW London PH Network website – follow hyperlink. <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a> <ul style="list-style-type: none"> <li>Guidelines uploaded to CEMMAg web pages and publicised via PC Clinical Effectiveness Bulletin, and via GP Prescribing Bulletin.</li> <li>Guidelines sent electronically to GPs, Community Pharmacists and Health Visitors.</li> </ul>
NHS Wandsworth prescribing guidance	Prescribing Guidelines on Gluten-Free products Information for GPs	CEMMAg, 3/3/2011	Shaneez Dhanji, GP Prescribing Support Pharmacist. NHSW, Auline Cudjoe, Primary Care Prescribing Lead Dietitian, CSW	This guideline should be used in conjunction with NICE clinical guideline 86 Coeliac disease: recognition and assessment of coeliac disease. May 2009.	<ul style="list-style-type: none"> <li>Guidelines uploaded onto CEMMAg web page and publicised via PC Clinical Effectiveness Bulletin, and GP Prescribing Bulletin.</li> <li>Guidelines sent out to GPs with template letter</li> </ul>
NHS Wandsworth prescribing guidance	Anti-Platelet Guidelines for Primary Care	CEMMAg 2/6/2011	Nicola Jones and Simon Mills	Developed by NHS Wandsworth CVD Clinical Reference Group May 2011	Available on SW London PH Network website – follow hyperlink. <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a> <ul style="list-style-type: none"> <li>Guidelines uploaded onto SWL PH Network prescribing web page</li> <li>publicised via PC Clinical Effectiveness Bulletin, and GP Prescribing Bulletin</li> </ul>
SGH and SWL&StG MH Trust in partnership with Kingston,	Shared Care Prescribing Guideline for the treatment of Alzheimer's Disease	CEMMAg 2/6/2011	Nick Beavon	NHS Wandsworth CEMMAg re-approved these guidelines.	Available via the SWL PH Network website under: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/swl-interface-prescribing-policy-and-appendices/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/swl-interface-prescribing-policy-and-appendices/</a> <ul style="list-style-type: none"> <li>Guidelines uploaded onto SWL PH Network</li> </ul>



Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
Richmond, Sutton & Merton, and Wandsworth PCTs					<p>prescribing web page</p> <ul style="list-style-type: none"> <li>publicised via PC Clinical Effectiveness Bulletin, and GP Prescribing Bulletin</li> </ul>
NICE Clinical Guideline and Public Health Guidance	CG100 Alcohol-use disorders: Diagnosis and clinical management of alcohol-related physical complications PH24 Alcohol-use disorders - preventing harmful drinking	CEMMA G 2/6/2011	Martyn Penfold	MP was co-ordinating ongoing work relating to this guidance in the context of the local alcohol strategy.	<p>Available via the NICE website on:  <a href="http://publications.nice.org.uk/alcohol-use-disorders-diagnosis-and-clinical-management-of-alcohol-related-physical-complications-cg100">http://publications.nice.org.uk/alcohol-use-disorders-diagnosis-and-clinical-management-of-alcohol-related-physical-complications-cg100</a>  and  <a href="http://guidance.nice.org.uk/PH24">http://guidance.nice.org.uk/PH24</a></p>
NICE Public Health Guidance	PH 25 Prevention of cardiovascular disease at population level	CEMMA G 2/6/2011	Amanda Cranston	<p>Baseline assessment completed which identified in relation to each recommendation compliance, gaps and actions</p> <p>AC to write paper re implementation jointly with the Local Authority (LA), for approval at the appropriate LA committee. AC to make proposals for how to take forward implementation.</p>	<p>Available via the NICE website on:  <a href="http://guidance.nice.org.uk/PH25">http://guidance.nice.org.uk/PH25</a></p>
NICE Public Health Guidance	PH28 Promoting the quality of life of looked-after children and young people	CEMMA G 2/6/2011	Samara Hammond and Eileen Ashitey	<ul style="list-style-type: none"> <li>SH reported that leads had been appointed to carry out baseline assessments in relation to different recommendations.</li> <li>IA reported in Feb 2012 that a multiagency group had discussed and RAG-rated the document, following which an action plan was to be developed, which will be monitored by the Strategic CLA Overview Group.</li> </ul>	<p>Available via the NICE website on:  <a href="http://guidance.nice.org.uk/PH28">http://guidance.nice.org.uk/PH28</a></p> <p>No self assessment completed to date.</p> <p>(Overall responsibility for child protection issues has passed to Caroline White. Ongoing work on implementation of this guidance co-ordinated by EA.)</p>

Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
NICE Public Health Guidance	PH33 and PH 34: increasing the uptake of HIV testing amongst black Africans in England and amongst men who have sex with men	CEMMA G 2/6/2011	Nicola Doble and Wendy Majewska	NICE guidelines recommend considering the following when HIV prevalence in an area exceeds 2 per 1,000 (NB rate in Wandsworth is a little under 5 per 1,000): 1. Testing all new patients registrations at GP practices 2. Testing all patients who attend A&E Two pilot programmes were established in Wandsworth: 1. 19 GP practices signed up to the pilot, where they offer rapid HIV testing to all new patient registrations during the new patient check during Feb – Apr 2011. After evaluation, this was extended to Mar 2012. 2. An HIV test was offered to all patients attending A&E at St George's during March where the patient was aged 18-59, already requiring a blood test and able to give consent.	Available via the NICE website on: <a href="http://guidance.nice.org.uk/PH28">http://guidance.nice.org.uk/PH28</a> :
Wandsworth GP letter/protocol	Use of Eplerenone Post MI	CEMMA G 1/9/11	Nick Beavon	Approved by: CVD Clinical Reference Group & NHSW Clinical Effectiveness and Medicines Management Group	Available on: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a>
Wandsworth primary care prescribing guidance	Prescribing Low Molecular Weight Heparins (LMWHs)	CEMMA G 1/9/11	Mary Rehman	The aims of this document are : <ul style="list-style-type: none"> <li>To support General Practitioners in the governance and safety of continuing the prescribing of LMWHs once initiated by an appropriate specialist.</li> <li>To minimise the inconvenience for patients by reducing unnecessary patient follow-up visits to hospital to simply collect prescriptions for LMWHs.</li> </ul>	Available on: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a>

Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
NHS Wandsworth Guidance for primary care	Quick Reference Guide for Combined Oral Contraceptives	CEMMAg 1/9/11	Sharon Wouda	Approved	Available on: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a>
NHS Wandsworth Guidance for primary care	Medicines Management of Asthma - Guidelines for Primary Care	CEMMAg 1/9/11	Mary Rehman	Approved.	Available on: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a>
Smokefree Wandsworth – smoking cessation service	Smoking Cessation prescribing guidelines	CEMMAg 1/9/11	David Tamby-Rajah	CEMMAg approved an update of the SmokeFree Wandsworth smoking cessation guidelines to include Quickmist oral NRT spray.	The updated smoking cessation guidelines are not available via SWL PH Network
NHS Wandsworth	Primary Care Protocol For GLP-1 Mimetics: Exenatide And Liraglutide	CEMMAg 23/2/12	Sharon Wouda	Approved	not available via SWL PH Network. Exenatide and liraglutide are glucagon-like peptide-1 (GLP-1) mimetics (or receptor agonists), which stimulate glucose dependent insulin secretion and suppress glucagon secretion in response to food.
South London Cardiac and Stroke Network Guideline	Managing uncomplicated hypertension	CEMMAg 23/2/12	Rajiv Dhir and Nick Beavon	Approved by CEMMAg in advance of minor amendments as suggested by the CVD Clinical Reference group.	Available via the South London Cardiac and Stroke Network (SLCSN) website: <a href="http://www.slcsn.nhs.uk/prescribing.html">http://www.slcsn.nhs.uk/prescribing.html</a>
South London Cardiac and Stroke Network Prescribing Guideline	Prescribing Ivabradine for Chronic Heart Failure	CEMMAg 23/2/12	Rajiv Dhir and Nick Beavon	Approved by CEMMAg in advance of possible amendments and approval by SGH Drugs and Therapeutics Committee.	Available via the South London Cardiac and Stroke Network (SLCSN) website: <a href="http://www.slcsn.nhs.uk/prescribing.html">http://www.slcsn.nhs.uk/prescribing.html</a>
NICE Clinical Guideline	CG117 Clinical diagnosis and management of tuberculosis, and measures for its	CEMMAg 23/2/12	Anne Middleton	AM reported that most of the NICE recommendations were being implemented locally. Recommendations not yet implemented: <ul style="list-style-type: none"> <li>1.1.1.18 Single interferon gamma test not</li> </ul>	Available on the NICE website: <a href="http://guidance.nice.org.uk/CG117">http://guidance.nice.org.uk/CG117</a>  Updated baseline assessment submitted to CEMMAg Mar 2012:

Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
	prevention and control			<p>introduced – a waiting implementation of London Model of Care before making any changes to current strategy</p> <ul style="list-style-type: none"> <li>• 1.2.2.8 Training needs to be put in place regarding infection control (NB that masks, gowns and barrier nursing techniques are not needed except for certain forms of TB or types of treatment).</li> <li>• 1.7.7.1 Not all categories of workers recommended to receive BGG vaccination in fact receive it – a waiting the outcome of London Model of Care.</li> <li>• 1.8.7.1, 2, and 4 regarding the screening of new entrants - a waiting the outcome of the London Model of Care</li> <li>• 1.9.3.5 AM would bring to attention the stipulation that a contingency care plan should be drawn up by prison medical services as soon as possible which could be brought into effect in the event of an early discharge from prison of a person with active or latent TB.</li> </ul>	
NICE Public Health Guidance	PH32 on skin cancer prevention	CEMMAg 23/2/12	William Robert Margaret Ancobiah	<p>The annual Sunsmart campaign led by the Local Authority funds, co-ordinates, delivers and evaluates the plan to reduce skin cancer, including:</p> <ul style="list-style-type: none"> <li>• Progress with individual recommendations, highlighting some gaps with respect to training of key staff groups, addressing social and practical barriers to using sun protection, measurable objectives, and evaluation of the programme.</li> <li>• The Local Authority taking steps to discourage harmful exposure to UV via sunbeds: <ul style="list-style-type: none"> <li>○ No sunbeds in Local Authority-</li> </ul> </li> </ul>	<p>Available on the NICE website: <a href="http://guidance.nice.org.uk/PH32">http://guidance.nice.org.uk/PH32</a></p> <p>Baseline assessment showing gaps and actions:</p> <p>Margaret Ancobiah has taken over responsibility for ongoing implementation of this NICE guidance.</p>

Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
				<ul style="list-style-type: none"> <li>supported organisations               <ul style="list-style-type: none"> <li>○ Prohibition of commercial sunbed use by under 18s</li> </ul> </li> <li>• The role of the annual Sunsmart campaign led by the Local Authority with respect to funding, co-ordinating, delivering and evaluating the campaign, and current and forthcoming activities</li> <li>• Progress with individual recommendations, highlighting some gaps with respect to training of key staff groups, addressing social and practical barriers to using sun protection, measurable objectives, and evaluation of the programme.</li> <li>• The Local Authority taking steps to discourage harmful exposure to UV via sunbeds:               <ul style="list-style-type: none"> <li>○ No sunbeds in Local Authority-supported organisations</li> <li>○ Prohibition of commercial sunbed use by under 18s ('mystery shopper' technique used to test adherence to this rule)</li> </ul> </li> </ul>	
NICE Public Health Guidance	PH35 Preventing type 2 diabetes - population and community interventions	CEMMA G 23/2/12	Diabetes CRG	<p>This self-assessment focuses on a broad range of recommendations that can be implemented locally to encourage people to adopt healthy diets and to increase physical activity, for example:</p> <ul style="list-style-type: none"> <li>• That the JSNA should identify information of local communities at risk of developing diabetes, identify local interventions and resources together with gaps in provision</li> <li>• That a local strategy aimed at preventing type 2 diabetes exists</li> <li>• That there should be a range of specific</li> </ul>	<p>Available on the NICE website: <a href="http://guidance.nice.org.uk/PH35">http://guidance.nice.org.uk/PH35</a></p> <p>Baseline assessment with gaps and actions for each recommendation:</p> <p>Responsibility of co-ordination of implementation of this guidance passed to Diabetes CRG Feb 2012.</p>

Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
				<p>interventions for communities at high risk addressing barriers to participation, improving awareness of key messages, ensuring appropriate training of staff, using peer workers, etc.</p> <ul style="list-style-type: none"> <li>• That key messages should be conveyed to the local population in culturally appropriate ways and targeting high risk groups</li> <li>• That local action is taken to promote a healthy diet (NB involving aspects such as encouraging local food outlets and food retailers to promote healthy options, work in schools to improve awareness and uptake of healthy diets, etc)</li> <li>• That local action is taken to promote a physical activity</li> <li>• That those involved in promoting healthy lifestyles are trained</li> </ul> <p>Leads on areas associated with these categories of recommendations at both NHS Wandsworth and within the Local Authority had been consulted. Against all detailed recommendations within the above categories it was reported that they are either partially or fully met.</p>	
NHS Wandsworth PGD for practice nurses	Patient Group Direction documents (PGDs) for vaccinations and Immunisations	CEMMA G 24/5/12	Nick Beavon and Nicky Bamford	All Vaccs and Imms PGDs were reviewed and amended versions approved by CEMMA G.	The vaccs and imms PGDs are available on the SW London PH website: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/wandsworth-patient-group-directions/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/wandsworth-patient-group-directions/</a>
South London Cardiac and Stroke Network Pathway	Hypertriglyceridaemia Pathway	CEMMA G 24/5/12	Shaneez Dhanji and Nick Beavon	This simplified pathway for Hypertriglyceridaemia was approved by CEMMA G, subject to approval by the CVD Clinical Reference Group.	Available via the South London Cardiac and Stroke Network (SLCSN) website: <a href="http://www.slcsn.nhs.uk/prescribing.html">http://www.slcsn.nhs.uk/prescribing.html</a>

Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
NHS Wandsworth Guidelines for primary care	Medicines Management of Chronic Obstructive Pulmonary Disease (COPD) Guidelines for Primary Care	CEMMA G 24/5/12	Shaneez Dhanji and Reena Rabheru-Dodhy (NHS Sutton & Merton)	Approved. This version produced for use in NHS Wandsworth only.	Available via SWL PH Network: <a href="http://swlphnetwork.org.uk/uploads/documents/swlpc-interface-policy-documents/wandsworth-pct-cg-documents/copd-medicines-management-guideline-chronic-updated-may-2012-ceammg-approved.pdf">http://swlphnetwork.org.uk/uploads/documents/swlpc-interface-policy-documents/wandsworth-pct-cg-documents/copd-medicines-management-guideline-chronic-updated-may-2012-ceammg-approved.pdf</a>
St George's Healthcare NHS Trust	A Guide to Prescribing Adult Oral Nutritional Supplements in the Community	CEMMA G 26/9/12	Auline Cudjoe, Prescribing Lead Dietician, SGH	Approved by CEMMA G pending reformatting. NB The current cost of Adult Oral Nutritional Supplement prescribing in NHSW is £818k (June 2011-May 2012), much of which is unnecessary.	Not yet available via SWL PH Network
Croydon University Hospital and NHS Croydon Shared Care Prescribing Guideline	Shared Care Guideline: Prescribing Agreement Modafinil for Narcolepsy in adults	CEMMA G 26/9/12	Nick Beavon	SC Prescribing Guideline approved for use in Wandsworth.	Not yet available via SWL PH Network
South London & Maudsley NHS Trust & NHSW Shared Care guidelines	Shared Care Guidelines for ADHD medications: <ul style="list-style-type: none"> <li>• methylphenidate in patients 6 to 18 years</li> <li>• methylphenidate in adults</li> <li>• atomoxetine in patients 6 to 18 years</li> <li>• atomoxetine in adults</li> </ul>	CEMMA G 26/9/12	Nick Beavon	These four guidelines approved for use in Wandsworth. Children and adult guidelines needed to clarify how to deal with patients presenting with ADHD in adulthood. These guidelines are interim, and will be updated when the new local service for ADHD comes into operation.	Not yet available via SWL PH Network



Type of guidance	Title/name of guideline	Date	Leads	Guideline approval/implementation/action plan	Comments
South London Cardiac and Stroke Network And Wandsworth Clinical Commissioning group (NHSW)	Simvastatin prescribing Recommendations following revised safety advice	CEMMA G 26/9/12	Shaneez Dhanji	developed and approved by the South London Cardiac and Stroke Network (SLCSN) following further advice from the Medicines and Healthcare products Regulatory Agency (MHRA) regarding the increased risk of myopathy associated with the use of simvastatin 40mg or more. CEMMA G approved this prescribing advice. The CVD CRG would also need to approve the guidance.	Available on the SW London PH website via: <a href="http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/">http://swlphnetwork.org.uk/network-subgroups/pharmacy-subgroup/primary-care-prescribing/</a>
South London Cardiac and Stroke Network	Guidance on the use of rivaroxaban for stroke prevention in AF	CEMMA G 26/9/12	Shaneez Dhanji	Draft version presented. Awaiting final version and approval from SGH DTC. Then CEMMA G approval will be requested via Chair's Action.	Final approved version now available via the SLCSN website: <a href="http://www.slcsn.nhs.uk/noacs.html">http://www.slcsn.nhs.uk/noacs.html</a>
NICE Public Health Guidance	PH 29, 30, and 31 on preventing unintentional injuries among the under-15s	CEMMA G 26/9/12	Gabriel Agboado	Further action to address gaps in implementation to be co-ordinated through the development of a Wandsworth strategy and action plan for the prevention of accidental injuries in children. Overall accountability for this work stream is to the Health and Wellbeing Board through the Children and Young People's Partnership via Child Health Overview Group.	Available on the NICE website: <a href="http://guidance.nice.org.uk/PH29">http://guidance.nice.org.uk/PH29</a>  NICE self assessment and childhood accidental injury prevention strategy:

# Clinical Effectiveness and Medicines Management Group (CEMMaG)

## Terms of Reference Version 13 draft

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### **Aims**

1. To promote evidence-based clinical practice, medicines management and commissioning across primary care, secondary care and mental health care.
2. To ensure that commissioned services and PH policies and practice meet local need, reduce health inequalities, are evidence based and are consistent with national guidance, service frameworks and best practice, e.g. NICE guidance.
3. Contribute to clinical governance through supporting quality improvement across commissioned services and pathways.

### **Duties**

The CEMMaG will:

1. Advise the Clinical Commissioning Group (CCG), Wandsworth Local Authority, the Locality Clinical Commissioning Groups and the Clinical Reference Groups (CRGs) on the clinical and cost effectiveness of services and treatments including:
  - a. Reviewing evidence of effectiveness;
  - b. Advising on likely service and financial implications of health technologies, drugs and services found to be clinically and cost effective and appropriate for the needs of Wandsworth Clinical Commissioning Group (WCCG);
  - c. Advising on health technologies, drugs and services in which it may disinvest on the grounds of insufficient evidence of effectiveness.
2. Develop commissioning, clinical and medicine management guidelines and policies taking into account:
  - a. Evidence of clinical and cost effectiveness;
  - b. Impact on health inequalities;
  - c. Effect on patient safety;
  - d. Patient pathways;
  - e. Financial implications;
  - f. Feasibility of implementation.
3. Assess the relevance, effectiveness and implications of new drugs and health technologies and national/London/ sector-wide clinical and medicines management guidelines and, where appropriate, facilitate implementation in Wandsworth.

4. Establish a robust system for supporting WCCG, the CRGs and localities. Specifically:
  - a. Contribute to reviews of existing services to determine the extent to which they are both evidence based and clinically effective;
  - b. Contribute to the development and review of evidence-based service specifications;
  - c. To ensure that service specifications (including Locally Enhanced Service LES) include appropriate quality and safety indicators;
  - d. Consider possible service developments identified by the Individual Funding Request (IFR) Panels and, where appropriate, make recommendations to commissioners. Particularly identify frequent requests and set appropriate policies around these.
5. Co-ordinate the commissioning and implementation of NICE guidance within Wandsworth health services and pathways and key partner agencies including the Local Authority. The group will develop joint working to support the implementation of wide-ranging Public Health guidance that requires joint implementation by the NHS, Wandsworth Local Authority and other strategic partners.
6. Support CRGs and Clinical Governance by offering:
  - a. Review of proposed care pathways, guidance and templates in the light of NICE guidance and clinical effectiveness;
  - b. Review of proposed changes to care pathways and contracts to provide care based on those pathways;
  - c. Review medicines management aspects of clinical protocols and CRG pathways.
7. Review local Patient Group Directions (PGDs) and ratify these on behalf of WCCG, including:
  - a. Creating a register of PGDs;
  - b. Publishing these to the CEMMaG pages of the WCCG website and maintain them;
  - c. Ensuring timely reviews of these as part of the business cycle;
  - d. Discuss any issues with PGDs and develop or change PGDs as required.
8. Work with the WCCG Referral Management System to ensure that Effective Commissioning Initiative policies are included in Referral Support systems.
9. Set up and manage a CEMMaG area on the WCCG website.
10. Produce a CEMMaG Annual Report.
11. Report to the WCCG Management Team and the Integrated Governance Committee.

## **Membership and Quoracy**

### **The core members of the Group include:**

- CEMMaG GP Clinical Lead, WCCG (Chair)
- Chief Pharmacist
- Consultant in Public Health Medicine
- Clinical Effectiveness Facilitator

- Community Services Representative , St George’s Healthcare NHS Trust
- Acute Services Representative, St George’s Healthcare NHS Trust
- Mental Health Services Representative, SW London & St George’s Mental Health Trust
- Community Nurse Specialist
- Practice Nurse Development Lead
- Quality and Clinical Governance Lead
- Commissioning Manager
- 2 x GP Locality Commissioning Group and/or LMC GP representatives
- Community Pharmacy Contract Manager, NHSW
- Lay Member - Patient/Public Representative  
*(NB: CEMMaG gives high priority to ensuring the presence of a lay member at every meeting, whose role it is to represent the patient and/or public point of view. Whilst some of the business of CEMMaG is of a technical nature (e.g. prescribing guidelines), other items are less technical and more broad ranging. In either case, the input of a lay member is invaluable in ensuring clear and comprehensible discussions, maintaining a patient focus, and promoting greater transparency.)*

#### **Wider membership:**

To be co-opted /consulted as necessary

- SGH pharmacists
- Clinical Leads / Medical Director St George’s Hospital and of other trusts by special invitation
- Public Health Trainees (all trainees must participate during their attachment)
- Members of Wandsworth Public Health departments and Prescribing Team are part of the wider group. The group may ask any one of them to contribute to its work.
- The CEMMaG will invite others to take part in its discussions and projects as necessary; these may be people with particular expertise in clinical areas, commissioning or other aspects of service delivery or management.

#### ***The group will be quorate when the following are present:***

- ✚ **Public Health Representative**
- ✚ **GP Representative**
- ✚ **Pharmacy/Prescribing Representative**

## **Frequency of meeting & responsibilities**

### **1. *The group will meet every month***

Where decisions are required more rapidly the chair will take chair's actions supported by the Public Health Director and Chief Pharmacist.

### **2. **Accountability and reporting****

The group will be accountable and report to the WCCG Integrated Governance Committee, a sub-committee of WCCG Board.

### **3. **Conduct of the group****

CEMMAg will conduct its business in accordance with the codes of conduct set out for all Governing Body members and good governance practice as laid out in the Constitution.

### **4. **Administration****

The administration support of the Committee shall be managed by the Clinical Effectiveness Facilitator, to include:

- a. Agreement of agenda with Chair and attendees;
- b. Collation of papers;
- c. Taking the Minutes
- d. Keeping a record of matters arising and issues to be carried forward.

### **5. **Review****

*The Terms of Reference will be reviewed annually or more frequently if required.*

**CEMMAg  
December 2012**