



## **South Yorkshire Integrated Medicines Optimisation Committee Annual Report (April 2025- March 2026)**

### **Introduction**

The Integrated Medicines Optimisation Committee (IMOC) was established to bring together healthcare professionals from the four South Yorkshire Places to work in partnership within the South Yorkshire Integrated Care System. Bassetlaw representation is also present due to the interdependency of services used within SY. The aims of the committee are to work collaboratively to co-ordinate and agree the SY traffic light drug list and supporting clinical prescribing guidelines/shared care protocols in order to provide consistent and equitable access to evidenced based, cost-effective, sustainable medicines and for them to be used safely within relevant care settings across SY ICS in order to improve outcomes for patients accessing healthcare in South Yorkshire and Bassetlaw.

The committee publicises and disseminates its guidance place communication arrangements which include monthly written updates, education sessions at learning events and monthly learning at lunch sessions. All approved documents are made available on the NHS South Yorkshire Integrated Care Board website (see link - [South Yorkshire Integrated Medicines Optimisation Committee :: South Yorkshire I.C.B](#) )

This report aims to summarise the activities of the IMOC during April 2025 to March 2026 includes Drug reviews; Membership details; Attendance figures and activity of documents approved by the IMOC.

### **Membership**

The IMOC serves the South Yorkshire and Bassetlaw healthcare communities and has representatives from professional, clinical, educational, management and commissioning backgrounds from the following organisations:

#### **\*Core members**

- Chair – System clinician
- Senior pharmacist from each of the 4 place based area prescribing groups/committees. (Barnsley, Doncaster and Bassetlaw, Rotherham and Sheffield)
- Medicines Optimisation Portfolio leads
- A representative from Bassetlaw Place
- SY Local Medical Committees
- MHDL Trust pharmacy representative
- A Community Pharmacist representative from the SY ICS Community Pharmacy Forum
- A Chief pharmacist (or pharmacist with appropriate authority) from acute provider alliance
- Lay member/patient voice representative
- ICS Pharmacy technician representative



Optional attendance members (who attend as commitments allow or when relevant agenda items to discuss)

- Sheffield Children’s NHS(FT) Hospital Chief Pharmacist or representative
- Clinical leads/Specialists
- Specialised Commissioning Pharmacist/SY High-Cost Drugs Group Representative
- Public Health representative
- Social care representative
- Dental representative
- Optometry representative
- Dietitian
- ICS Contract lead
- Health and Justice representative
- NMP representative
- Hospice representative
- Senior Finance representative from SY ICB (system level)

### Attendance

The meetings are held monthly; there was a total of 12 meetings during April 2025- March 26. The table in [appendix 1](#) shows attendance figures for members of the committee or that of an appointed deputy.

Within the Terms of Reference, it is requested that representatives of the organisation have an annual attendance at IMOC meetings of at least 60%.

### Shared Care & Prescribing Guidance Documents

The following lists are Shared care Protocols (SCP) and Guidance documents that have been developed, or reviewed due to new evidence, changes in good practice or expiration of existing documentation:

Category	Document / Guidance	Approval Date
<b>SY Reviewed &amp; Updated SCPs / Guidelines</b>	Tirzepatide Position Statement (Overweight & Obesity)	May 2025
	Type 2 Diabetes Guidance	July 2025
	Denosumab Shared Care Protocol (SCP)	January 2026
	Tirzepatide Weight Management Position Statement	November 2025
	Gluten-Free Position Statement	January 2026
<b>Newly Developed SY SCPs</b> *Note there may have been a Place SCP previously	Melatonin SCP (Children & Young People up to 18)	December 2025



<b>New SY Prescribing Guidance &amp; Position Statements</b> *Note there may have been a Place Prescribing Guidance & Position Statements previously	Gliptins Position Statement	April 2025
	Vitamin D Guidance	May 2025
	Dental Position Statement	May 2025
	Metolazone Amber-G Guideline	June 2025
	Tirzepatide FAQ (Primary Care)	July 2025
	Lipid Modification in Younger Adults (T2DM)	July 2025
	Actinic Keratosis (AK) Guidelines	November 2025
	Direct Oral Anticoagulants (DOACs) Position Statement	November 2025
	Proxor Position Statement	November 2025
	Biosimilar Position Statement	December 2025
	Preferred SGLT2 Inhibitors Position Statement	December 2026
	Adult Asthma & COPD Guidelines	February 2026
	Atogepant & Rimegepant Amber-G Guidelines	February 2026
	SGLT2 Inhibitors in Chronic Heart Failure Guidance	March 2026
	Tirzepatide Patient Information Leaflet (PIL)	January 2026
<b>IMOC-Endorsed Guidelines</b>	Yorkshire & Humber Palliative Care Guideline	April 2025

### Ad-hoc interactions

The committee members have also been involved in other areas providing support and advice including:

- Local Commissioning Services (LCS) work is being reviewed
- Updating documents with safety updates, i.e valproate guidance
- South Yorkshire Primary and Secondary Care Interface Policy (June 2025)
- PolyPharmacy Structured Medication Reviews (SMR) resources (July 2025)
- SY 7 day prescribing position statement (January 2026)
- 3<sup>rd</sup> Party ordering patient information leaflet (February 2026)

### National Institute for Health and Care Excellence (NICE) Technology Appraisals (TA)

The ICB has a statutory requirement to fund positive NICE TA's. IMOC considers these each month and makes a recommendation as the most appropriate traffic light status within SY. New and updated NICE guidance. Working with places to update local prescribing documents where applicable, with a view to adopt these across SY where there are benefits in doing so.



For further information regarding NICE TA's can be found here

[:https://www.nice.org.uk/about/what-we-do/our-programmes/nice-guidance/nice-technology-appraisal-guidance](https://www.nice.org.uk/about/what-we-do/our-programmes/nice-guidance/nice-technology-appraisal-guidance)

### **Safety Updates**

SY Medicines Safety Officer attends the monthly IMOC meeting to present recent safety alerts which have been issued by the Medicines and Healthcare Products Regulatory Agency (MHRA), Drug Safety Update (DSU) and Central Alerting System (CAS). The committee discuss the impact for SY and agree any recommended actions for each Place to implement.

### **SY Traffic Light Drug List (TLDL)**

The SY IMOC TLDL is a database which provides guidance to prescribers on prescribing responsibilities for selected medications. It aims to provide clear understanding of where clinical and prescribing responsibility rests between specialists and GPs.

Criteria for the inclusion of medicines on these lists, or the moving of medicines between the different categories of the Traffic Light Drug Status (TLS), will be primarily based on: evidence, clinical responsibility, patient safety, willingness to provide agreed shared care information and the presence of an approved shared care protocol. Place prescribing and commissioning meetings/arrangements then consider any actions needed to support implementation.

Each drug is classified under one of the following categories (see full definition here –[SY IMOC TLDL classification](#) ):

- **Grey** - The use of medicines/products in the grey list should not be initiated in South Yorkshire unless exceptional circumstances apply. Patients who are already prescribed medicines/products within the grey list should be reviewed and alternative treatment options considered, in line with most recent evidence.
- **Red** - Initiation and ongoing prescribing of the medicine/product should be undertaken by secondary care/specialist.
- **Amber (Shared Care)**- Local shared care guidelines/protocols in place. Medicines/products that are initiated by a specialist but are suitable for primary care prescribing under a shared care agreement. Shared care must be agreed by both parties and should not assumed. Note however, some shared care arrangements assume primary care will undertake shared care responsibilities unless they inform the specialist to the contrary. In such situations the primary care clinician should inform the specialist and the patient in a timely manner with reasons for declining the shared care request.
- **Amber with Guidance (Amber-G)** - Local or national Guidelines to support ongoing prescribing in primary care. Medicines/products that are initiated by a specialist\* but are suitable for primary care to continue and take over ongoing prescribing responsibility. The specialist to provide the primary care clinician with necessary information and support in order for treatment to be managed safely in primary care. Amber G medicines may be less familiar or used less frequently in primary care.
- **Green**- These are medicines which are appropriate to be initiated and prescribed in primary and secondary care. They are generally familiar and frequently used medicines or for conditions generally managed in General Practice. Some medicines within this section may be started in primary care on the advice of a specialist or a clinician with specialist knowledge and training in area of care.



The category it is placed in determines the circumstances in which it is recommended to be prescribed and any guidance/rationale which needs to be taken into consideration. When new guidance/information is released on the drug, it is reviewed and the category it is placed in can be changed dependent on its place in therapy.

The TLS is available as a web-based version on the Medicines Optimisation website : <https://mot.southyorkshire.icb.nhs.uk/>

**Horizon scanning / Alignment of existing place arrangement  
Review of new drugs, formulations and indications**

At each meeting several lists of drugs are reviewed. These include; new indications for existing drugs; new drugs; existing TLS entries which are due for review or review of existing entries when there is new or emerging evidence available. The IMOC has established a working group, which includes a member of the Medicines Optimisation from each Place. The IMOC subgroup have agreed a set of principles in order to align all four Places TLDL to one SY IMOC TLDL.

The committee considers these under: -

- **Horizon Scanning** : new drugs, indications or formulations which are being considered for inclusion onto the Traffic Light System
- **IMOC Subgroup TLDL**: Reviewing Place traffic light status of medicine with the view to align them across SY. Reviewing current entries where the review date is due or new emerging evidence, such as the publication of a Summary of Product Characteristics (SPC) or new NICE guidance has been released.
- **NICE TA**: Traffic Light status is given to every NICE TA drug.
- **IMOC TLDL Application**: Formal applications to assign a traffic light status to a medication or challenge a current traffic light status can be done by completing an IMOC application.

The following shows a breakdown of the number of drugs that have been reviewed and agreed at the IMOC through the process of Horizon Scanning, TLDL sub group, NICE TA's and TLDL Applications.

Month	Horizon Scanning	TLDL subgroup	NICE TA's Drugs	TLDL Applications	Total of drugs reviewed
April 2025	7	16	5	0	28
May	3	20	15	1	29
June	1	20	8	1	30
July	5	26	9	0	40
August	4	11	13	1	19
September	7	35	6	0	48
October	1	93	8	1	103
November	3	57	10	4	74
December	10	14	10	3	37
January 2026	4	2	4	2	12
February	4	7	7	4	22
March	2	18	10	2	32
<b>Total number of drugs for the period</b>					<b>474</b>



**Communication**

The South Yorkshire Integrated Medicines Optimisation Committee Website provides a useful and informative resource for the public, staff members and healthcare professionals from Barnsley, Doncaster, Rotherham and Sheffield and other Trusts around the country.

The IMOC works collaboratively with each of the four Places governance arrangements to support implementation of agreed decisions. Each Place currently has their own formulary, and these are updated according to IMOC decisions. Where decisions may result in the need for new or a change in commissioning arrangements this will be fed into Place/SY wide commissioning groups to action.

**Preparation and Support**

Support to the IMOC from IMOC Chair & Medical Lead for Medicines Optimisation, SY ICB Programme Director for Medicines Optimisation (Clinical Effectiveness, Quality and Safety), IMOC secretary Senior Medicine Optimisation Technician, Medicines Optimisation Pharmacists from: Barnsley, Doncaster, Rotherham & Sheffield and, SY Medicines Safety Governance Pharmacist IMOC Subgroup members consist of Medicine Optimisation Pharmacists and Technicians for each Place. Meeting every two weeks to discuss and review proposed IMOC documents including IMOC applications, clinical guidelines, NICE Technology appraisals, Place traffic light queries and aligning traffic light statuses into one SY TLDL.

**Future Plans**

All work undertaken is led by the clinical leads within the South Yorkshire Medicines Optimisation Place Teams in collaboration with numerous South Yorkshire Place colleagues, including those from provider organisations and community pharmacy colleagues. This year we have seen 9 guidelines approved across the South Yorkshire and Bassetlaw footprint. Although this comes with challenges, it does bring about consistency across the ICS which improves patient pathways, reduces variation, duplication of effort and helps clinician and patients alike to navigate across SY ICB boundaries.

**Objectives** The committee agrees that the over-arching functions of the IMOC provide adequate objectives and the IMOC work programme for the period is included below to demonstrate progress.

**2025-26 Work Programme**

Month	Item	Progress
April 2025	Gliptin Position Statement	Completed
	Yorkshire & Humber palliative care guideline	Completed
May	SY Vitamin D Guidance	Completed



	SY Dental Statement	Complete
June	Metolazone Amber G Guidance	Completed
	South Yorkshire Primary and Secondary Care Interface Policy	Completed
July	Tirzepatide type 2 diabetes guidance (updated)	Complete
	Lipid modification in younger adults with T2DM	Completed
	Acarizax and Grazax Shared Care Protocol (SCP) - Update current SCP	Completed
August	Electronic Shared Care Protocols (SCP)	On-going
	Children's and Young people asthma guidelines	Completed
September	SY ICS Third Party Ordering position statement	Completed
October	Atogepant & Rimegpan Amber G Guidelines	On-going
November	Actinic Keratosis (AK) guidelines	Completed
	Tirzepatide weight management guideline	Completed
	Updated Tirzepatide weight management SY position statement	Completed
	Direct Oral Anticoagulants (DOACs) SY position statement	Completed
December	SY & Bassetlaw Melatonin Shared Care Protocol (SCP) for children and young people up to the age of 18	Completed
	Biosimilar Position statement	Completed
	SY ICB Position Statement on Preference of SGLT2 Inhibitors	Completed
January 2026	Updated SY Denosumab Shared Care Protocol (SCP)	Completed



	Tirzepatide patient information leaflet (PIL)	Completed
	SY Gluten Free position statement	On-going
	SY 7 day prescribing position statement	Completed
February	Updating Relugolix Shared Care Protocol (SCP)	On-going
	Daridorexant Traffic light status updated with supporting documents	Completed
	SY Adult asthma and COPD Guidelines	Completed
	3rd Party ordering patient information leaflet	Completed
	Atogepant & Rimegepant Amber G Guidelines	Completed
March	Prescribing guidelines for the use of SGLT2 inhibitors (Dapagliflozin and Empagliflozin) in the management of chronic heart failure	Completed
	SY Gabapentinoid deprescribing guidance and Patient Information Leaflets	On-going
	Monitored Dosage system (MDS) Patient Information leaflet (PIL)	Completed



**Appendix 1: Attendance Record**

Name	Job Title	Organisation	Possible no. of attendance's	Meetings Attended	% attended
David Warwicker (DW)	IMOC Chair Medical Lead for Medicines Optimisation		12	12	100
Alex Molyneux (AJM)	NHS SY ICS Chief Pharmacy Officer Interim chair Dec- Feb 2026		12	8	66
Ashley Hill (AH)	SYICB Senior Medicines Optimisation Technician- (IMOC Secretary)		12	11	92
Jennifer Bussey	SYICB Senior Medicines Optimisation Technician- Sheffield (IMOC Secretary)	<b>Sheffield</b>	1	1	100
<b>ICB Place Representatives</b>					
Heidi Taylor (HT)	SYICB Medicines Optimisation Programme Director (Clinical Effectiveness, Quality and Safety)	-	12	12	100
Barbara Obasi (BO)	SYICB - Clinical Effectiveness Lead Pharmacist-Sheffield	<b>Sheffield</b>	12	8	66
Shameila Afsar-Baig(SAB)	Senior Pharmacist (Strategy and Delivery)- Sheffield	<b>Sheffield</b>	12	11	92
Emily Parson (EP)	SYICB- Medicines Safety officer		7	7	100
Govinder Bhogal (GOVB)	SYICB Medicines Optimisation Programme Director (Pathways and Portfolios)	-	12	9	75
Eloise Summerfield (ES)	Senior Pharmacist (Strategy & Delivery) Rotherham Place Support to High Cost Drugs (Pathways)	<b>Rotherham</b>	12	7	58
Sophie Holden (SH)	Rotherham GP MM lead for Rotherham Place	<b>Rotherham</b>	12	8	66
Jason Page (JP)	Rotherham Place Medical Director	<b>Rotherham</b>	12	0	0
Charlotte McMurray (CM)	SYICB Medicines Optimisation Programme Director (Pharmacy Integration and Development)		12	9	75
Ewa Gabzdyl	Senior Pharmacist Strategy & Delivery- Doncaster Place	<b>Doncaster</b>	12	9	75
Rob Wise (RW)	Senior Pharmacist NNICB - Bassetlaw Place Partnership	<b>Bassetlaw/ Nottingham &amp; Nottinghamshire</b>	12	10	83
Chris Lawson (CL)	SYICB Medicines Optimisation Programme Director (Strategy &	-	12	5	42



	Delivery)				
Deborah Cooke (DC)	Senior Pharmacist [Strategy and Delivery - Barnsley & Clinical Effectiveness]	<b>Barnsley</b>	<b>12</b>	<b>11</b>	<b>92</b>
Joanne Howlett (JH)	Medicines Optimisation Lead Pharmacist (Strategy and Delivery - Barnsley)	<b>Barnsley</b>	<b>12</b>	<b>12</b>	<b>100</b>
<b>Acute Trust Representatives</b>					
Esoop Bharoocha (EB)	SYICB Deputy Chief Pharmacist – Rotherham Hospital	<b>Rotherham</b>	<b>12</b>	<b>5</b>	<b>42</b>
Surinder Ahuja (SA)	Medication Safety Officer & Lead Pharmacist Governance and Formulary- Rotherham	<b>Rotherham</b>	<b>12</b>	<b>6</b>	<b>50</b>
Kulsoom Khan	Procurement pharmacist at TRFT	<b>Rotherham</b>	<b>12</b>	<b>6</b>	<b>50</b>
Rachel Wilson	Senior Pharmacist DBTHFT	<b>Doncaster</b>	<b>12</b>	<b>0</b>	<b>0</b>
Lee Wilson (LW)	Consultant Pharmacist DBTHFT	<b>Doncaster</b>	<b>12</b>	<b>10</b>	<b>58</b>
Gillian Turrell (GT)	SYICB- Hospital Pharmacist- Barnsley	<b>Barnsley</b>	<b>12</b>	<b>1</b>	<b>8</b>
Graham Marsh (GM)	Sheffield Teaching Hospital Chief Pharmacist	<b>Sheffield</b>	<b>12</b>	<b>1</b>	<b>8</b>
Joanne Wragg (JW)	Sheffield Children's NHS FT Chief Pharmacist	<b>Sheffield</b>	<b>12</b>	<b>2</b>	<b>17</b>
Abiola Allinson (AA)	SYICB Chief Pharmacist- SHSC	<b>SHSC</b>	<b>12</b>	<b>6</b>	<b>50</b>
Chidambaram Nathan (CN)	Transplant and General surgery Consultant - STH	<b>Sheffield</b>	<b>12</b>	<b>0</b>	<b>0</b>
<b>Local Medical committee Representative</b>					
Neil Thorman (NT)	LMC representative – Rotherham	<b>Rotherham</b>	<b>1</b>	<b>0</b>	<b>0</b>
Bipin Chandran (BC)	LMC representative – Rotherham	<b>Rotherham</b>	<b>9</b>	<b>8</b>	<b>89</b>
Dean Eggitt (DE)	LMC representative – Doncaster	<b>Doncaster</b>	<b>12</b>	<b>9</b>	<b>75</b>
Krishna Kasaraneni (KK)	LMC Representative – Sheffield	<b>Sheffield</b>	<b>12</b>	<b>0</b>	<b>0</b>
<b>Mental Health Representatives</b>					
Steve Davis (SD)	RDaSH Chief Pharmacist	<b>RDaSH</b>	<b>12</b>	<b>9</b>	<b>75</b>
Sarah Hudson (SH)	Deputy Chief Pharmacist SWYPFT	<b>SWYPFT</b>	<b>12</b>	<b>5</b>	<b>42</b>
<b>Community Pharmacy Representation</b>					
Chris Bland (CB)	Chair community pharmacy South Yorkshire	<b>Community Pharmacy</b>	<b>12</b>	<b>9</b>	<b>75</b>
Claire Thomas (CT)	Community Pharmacy Clinical lead	<b>Community Pharmacy</b>	<b>12</b>	<b>0</b>	<b>0</b>



Patient Representative					
Trish Edney (TE)	Sheffield Healthwatch Representative	<b>Patient Representative</b>	<b>12</b>	<b>9</b>	<b>75</b>

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IMOC approved June 2026 V1.0