

# Supporting better quality health and social care for everyone in Scotland

National Cancer Medicines Advisory Group (NCMAG) Programme

# **Implementation of NCMAG Advice 2023 Report**

May 2024 (Updated October 2024)

Version 2.0



## Background

A key aim of the NCMAG programme is to deliver advice which supports equitable access to safe and effective off-label and off-patent uses of cancer medicines to improve outcomes for patients across NHSScotland. To help understand if NCMAG advice is delivering on supporting equitable access, Health boards were approached regarding their implementation of NCMAG advice. A survey was shared with health board lead cancer pharmacists, for completion to reflect the situation in their Boards between 17 May and 31 May 2023. During this period 5 NCMAG advice statements were published, 4 supported and 1 not supported. The questionnaire consisted of eight questions to capture information surrounding current processes used at board level when implementing, and status of, NCMAG advice.

## Results

The respondents included at least two from each regional cancer network, with representation of eight health boards. The medicines governance processes and formularies of some territorial health boards are aligned with regional groups (for example the West of Scotland Cancer Area Network, WoSCAN) or with those of larger territorial boards. The responses received are consequently relevant for all 14 territorial health boards.

There is variation in the current processes used for managing board level individual and group level requests for the use of off-label cancer medicines. One area of variation is the medicines management group that manages the request, with a mix of regional and local, cancer-specific and general groups. All respondents indicated that their Health boards or regional networks had implemented at least three of the four NCMAG supported proposals which were current at the time, with six out of eight responding boards having implemented all four (suggesting access for 91% of the Scottish population).

There is variation in governance processes used for the implementation of NCMAG advice. The results of the survey highlight that most of the respondents' (7/9) health boards or regions are using the same or similar governance processes, when implementing NCMAG advice, as when considering and implementing Scottish Medicines Consortium advice. Two respondents' health board and regional cancer networks are using the same process as for local off-label or unlicensed medicines group requests.

Workforce and/or capacity challenges were cited as current and potential continuing challenges when implementing advice, especially when there are significant service implications to the advice.

Overall, the respondents stated satisfaction with the advice document (9/9) and NCMAG's proposal process (8/9). One responder highlighted the importance of relevant specialist pharmacists from all regions and boards being made aware of and supporting all new proposals being submitted to NCMAG.

#### Conclusions

Health board and regional network respondents, whose governance processes cover access for all of NHSScotland, report a high level of implementation of NCMAG advice, with all respondents (n=9) reporting implementation of 3 out of 4 NCMAG supported proposals, and most implementing all four.

These results indicate that NCMAG is moving towards its aim of supporting equitable access to safe and effective off-label and off-patent uses of cancer medicines in Scotland. However, there is variation in the medicines governance processes used at Board level when considering implementation of NCMAG advice. Workload and/or capacity challenges and the absence of national guidance on how to manage NCMAG advice at Board level may be contributing factors to this variation. While this survey did explore how NCMAG advice is managed through governance processes at regional and Board level it did not seek to explore clinical usage of NCMAG supported treatments.

#### Summary of changes

Date	Last version	Amendment	Current version
October 2024		All sections of the report were updated to account for a response from one additional health board	v2.0