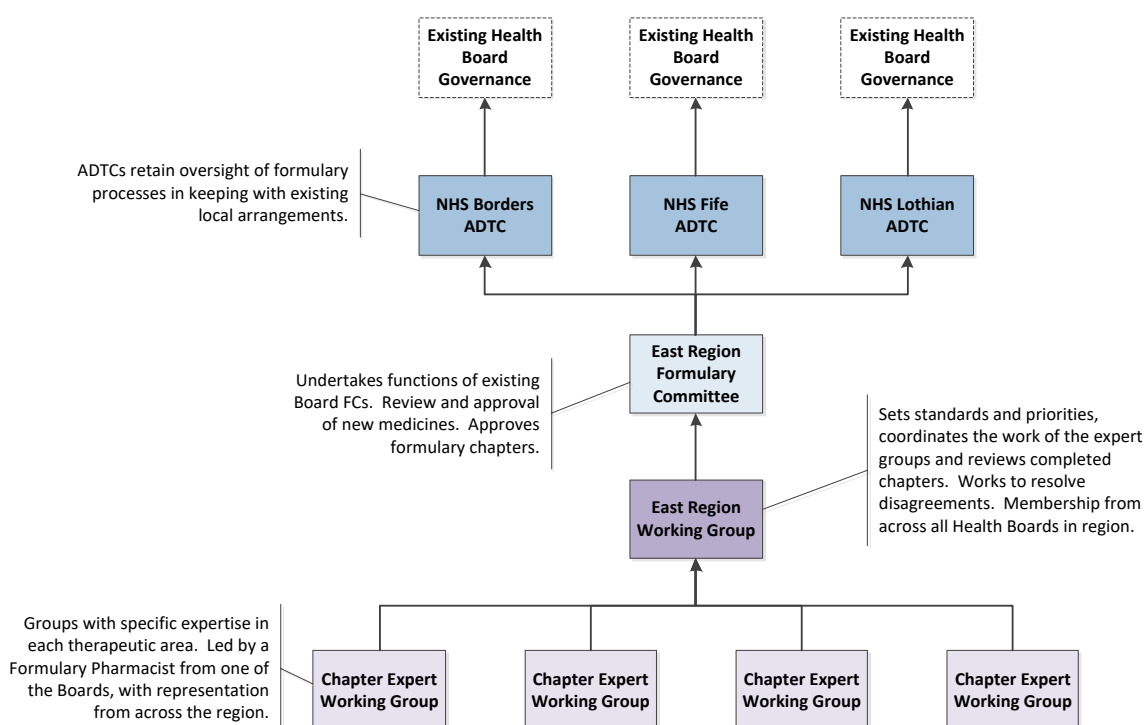




East Region Formulary Committee Terms of Reference

September 2021



The detail on the following pages outlines the draft terms of reference for the first of the following three new committees/groups:

1. **ERFC - East Region Formulary Committee.**
2. ERWG - East Region Working Group.
3. CEWG - Chapter Expert Working Group

East Region Formulary Committee - Terms of Reference

1. Purpose

- To provide professional advice, clinical advice and leadership on all aspects of the East Region Formulary (hereafter known as the ERF) to the relevant NHS Boards (NHS Borders, NHS Fife and NHS Lothian) that supports safe, clinically and cost effective, patient centred medicines governance, in all care settings, ensuring the effective use of resources and to receive and respond to local and national priorities.
- To have overall responsibility for formulary decisions and other issues relating to the safe and effective use of medicines. It is a clinically led and clinically driven committee ensuring formulary issues are addressed and agreed across all three NHS Boards. This includes other frequently prescribed products e.g. wound care and oral nutritional supplements.
- The East Region Formulary Committee (ERFC) is responsible for and will receive minutes from the East Region Working Group (ERWG).
- The ERFC receives and has the opportunity to comment on reports from the Scottish Medicines Consortium (SMC).
- The ERFC is responsible for making decisions on the use of medicines for the relevant NHS Boards. This is a delegated authority from the relevant ADTCs.

2. Remit

- To advise and support the strategic direction of all aspects of formulary related medicines governance and usage in all care settings.
- Ensure multi-stakeholder engagement and joint working on all ERF related issues within all care settings, including social care settings.
- Ensure the development, implementation and monitoring of a clinically and cost-effective ERF; introduction of new medicines; and consider systems for the safe and secure prescribing, administration, and medicines governance systems which take account of safety, clinical effectiveness and cost-effectiveness.
- Oversee the system for evaluation of new therapeutic developments and effectively manage their introduction into routine use in the East Region (NHS Borders, Fife and Lothian). The committee will consider new medicine applications.
- Oversee the development and maintenance of formulary application processes to agree proposed changes, additions and deletions to the ERF from healthcare professionals across the three Boards.
- Taking clinical and cost-effectiveness into account, provide information, to Board ADTCs, on the financial implications of implementing new drug recommendations from SMC, or other national recommendations e.g., formulary decisions and changes in prescribing policy which may result in changes in drug expenditure or have an impact on delivery of clinical services. Any concerning clinical or financial implications identified at the ERWG will be referred to the ERFC for discussion and/or resolution.

- Ensure effective systems are in place for formulary appeals.
- Ensure systems are in place for the dissemination of formulary related information and advice to professional staff in NHS Borders, Fife and Lothian, promoting safe, efficient and cost-effective use of medicines taking into account current evidence and best practice.
- The ERFC provides advice for and reports directly in to the ADTCs of NHS Borders, Fife and Lothian.
- Oversee the proactive promotion and improved awareness of the ERF
- Provide an annual report to the three Board ADTCs on the formulary adherence and usage

3. Membership

The membership of the committee shall consist of:

- Hospital Physician (or deputy)
 - GP (or nominated deputy)
 - Formulary pharmacist representation from all 3 boards
 - Senior pharmacist – primary care
 - Senior pharmacist – secondary care
 - Senior Nurse
 - Community pharmacy representative
 - Chair of East Region Working Group
 - Committee professional secretary
 - Non-medical prescriber
- The appointment of the Chair (and Vice-chair where required) will come from two separate Boards and from different professions. All three Board ADTCs need to ratify the appointments of both the Chair and Vice-chair. If there is a single chair (rather than shared co-chairs) – a vice-chair will be required.
 - Members will be chosen because of their known expertise, enthusiasm and knowledge of the clinical and cost-effective use of medicines.
 - The period of membership will be 3 years and can be extended by agreement between the individual and the chair and vice-chair.
 - All attendees need to have delegated responsibility from their Board for decision making.
 - A roll of attendance will be kept and members who do not attend at least half of the meetings each year will be asked to attend more frequently or to resign.
 - All members have a responsibility to send a deputy if they are unable to attend meetings and bring issues from and feedback to their specific area
 - Administrative support will be shared between the three Health Boards.
 - Decision making will be, where possible, by consensus. If this is not possible, the decision will be taken on the basis of a majority vote. The chair holds a casting vote.
 - If one Health Board has a differing view to the majority decision – the Chair and vice-chairs will take this forward to resolve. There may be occasions where recommendations from tertiary services need to be taken into account.
 - The ERFC may wish to engage with other stakeholders as required on specific work streams or to extend membership, this could include representation from other Health Boards

4. Meetings

The ERFC will meet every 2 months once established (but it may meet more frequently in the initial stages of the ERF).

Standing agenda items are

- Formulary application forms
- SMC not recommended advice
- ERF chapter amendments
- Minutes from ERWG

4.1 Agenda and Papers

The agenda and papers will be circulated at least 5 working days in advance of the meeting.

4.2 Quorum

Representation from all three health boards including a hospital physician, a GP and a pharmacist. There also needs to be a minimum of 50% attendance from the membership.

4.3 Minutes

Formal minutes will be kept of the proceedings and approved by the chair. They are reviewed at the next ERFC meeting. Minutes will be published on the ERF website 14 days after the meeting. (<https://formulary.nhs.scot/east/>).

4.4 Declaration of Interest

All members are expected to make an annual declaration of competing interests, direct or indirect, that they have in relation to the work of the ERFC. These will be strictly confidential and held securely by the secretariat. Members are also required to declare and competing interest to the committee when commenting on relevant items of business at the beginning of each meeting.

5. Operating and Reporting Arrangements

The ERFC reports directly in and is accountable to all three Health Board Area Drug and Therapeutics Committees (NHS Lothian, NHS Fife and NHS Borders). The ERWG will be a sub-committee of the ERFC.

The ERWG will reach a decision on an SMC Accepted medicine **within 90 days** of the issue of SMC advice to NHS Boards (i.e. this advice is confidential for the first 30 days). However, there may be certain circumstances which will necessitate a degree of flexibility in relation to the time frame e.g. to allow for training; premises requirements; testing etc. The ERF will publish on the website, the formulary decision **within 14 days** of the decision being reached.

Terms of reference to be reviewed annually

Date approved: 29th September 2021 at ERFC meeting

Review date: 30th September 2022