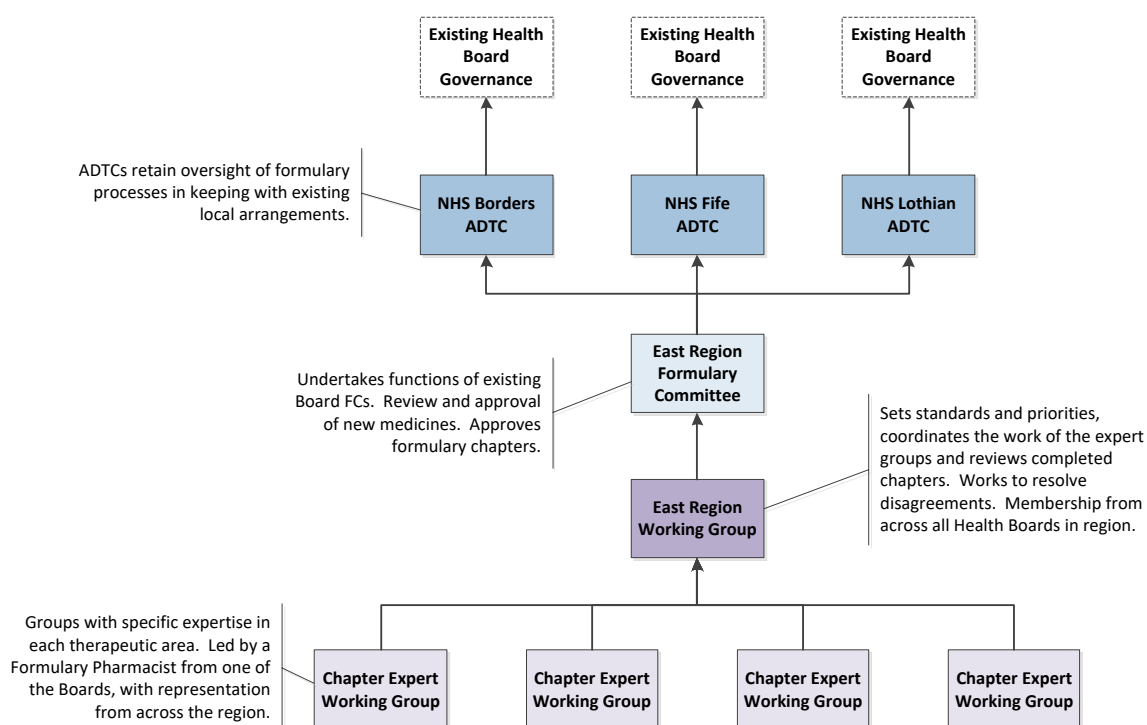




## Chapter Expert Working Group Terms of Reference

September 2021



The detail on the following pages outlines the draft terms of reference for the third 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**

## **Chapter Expert Working Group - Terms of Reference**

### **1. Purpose**

The CEWGs are a network of expert clinical groups, responsible for the development, content and detail of specific therapeutic areas of the ERF on behalf of the relevant NHS Boards (NHS Borders, NHS Fife and NHS Lothian). Their work is co-ordinated by the ERWG.

The CEWG's will initially review in full, all therapeutic areas of the ERF. It will also consider proposed changes, additions and deletions to the ERF on behalf of the three Boards and advises on the placement of new medicines, including new indications and new formulations of existing medicines. The CEWG will also review all therapeutic areas of the ERF on an ongoing, regular basis. All proposals are submitted to the ERWG for review, before being submitted to the ERFC for approval.

There will be a CEWG for each of the following areas:

- 1) Gastro-intestinal system
- 2) Cardiovascular system
- 3) Respiratory system
- 4) Central nervous system (5 CEWG's)
- 5) Infections
- 6) Endocrine system
- 7) Obstetrics, gynaecology & urinary tract (4 mixed CEWG's between this and Endocrine)
- 8) Malignant disease & Immunosuppression
- 9) Nutrition and blood
- 10) Musculoskeletal & joint diseases
- 11) Eye
- 12) Ear, nose and oropharynx
- 13) Skin
- 14) Anaesthesia
- 15) Gluten-free (virtual group)
- 16) Wound section

### **2. Remit**

- Responsibility for the detail of specified therapeutic areas of the ERF, which lists medicines choices, dosages and key prescribing information. Pathways may also detail non-pharmacological treatments where they should be used in preference to medicines.
- Providing advice about Scottish Medicines Consortium (SMC) and NICE/SIGN/HIS recommendations on new drugs and recommendations to reflect formulary decisions on accepted medicines.
- Ensure that all proposed formulary changes consider the cost effectiveness of the medicine and its comparators. Cost comparison data will be utilised to support discussions and decision making. Any significant cost implications of a medicine change will be highlighted to the ERWG.

- Ensure that all proposed formulary changes take into account considerations on the environmental impact of the medicine. Acknowledging that robust information on this is not yet readily available.
- Discuss proposed changes, additions and deletions to the ERF from healthcare professionals across the three Boards with the aim of consensus agreement.
- Ensure effective communication with the ERWG and the ERFC.
- Ensure views of the three Health Boards clinicians are incorporated within the medicines recommendations that pass to the ERWG.
- Work on regular updates on specified formulary therapeutic areas as requested by the ERWG.

### **3. Membership**

The membership of the group will vary, depending on the therapeutic area being reviewed. For the majority of content it would be expected that it shall consist of:

- Health Board formulary pharmacist (Chair)
  - Acute medical representative(s) (or deputies) (1 from each Board – covering a range of specialties)
  - GP(s) (or nominated deputies) (1 from each Board)
  - Pharmacists (Acute clinical pharmacist and/or Primary care pharmacist) (1 pharmacist from each Board – ensuring there is both an acute and primary care representative across the East region but not both from each Board)
  - Nursing representative(s) (where appropriate) (1 in total)
  - Non-medical prescriber where appropriate
  - East Region Formulary project team representative(s)
- The appointment of the Chair and the membership will be the responsibility of the ERWG.
  - The Chair shall be a formulary pharmacist from one of the three Boards. It may not always be the same formulary pharmacist.
  - All attendees need to have gathered information and advice from the relevant healthcare colleagues within their respective Board.
  - Members of the CEWGs are chosen to reflect expertise across primary and secondary care. Members may be drawn through NHS Board contacts, through MCNs or by self-nomination
  - Members have responsibility to ensure that the content of the ERF section remains up to date.
  - Meetings of the CEWG can be proposed by any member of the CEWG, ERWG or the ERFC. All meetings are organised through the Formulary Pharmacist Chair.

- 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 is passed to the ERWG where they will review the evidence and discussion points and make the final recommendation.
- Members of the CEWG need to ensure that they will be representative of their profession/sector and respective Board, bringing forward the views and issues of that grouping and will disseminate information/decisions to colleagues as appropriate. This feedback must be two way to allow clear and transparent discussion and decision making to take place.
- Members of the CEWG, within the remit of their job role, ensure that those involved with local implementation are aware of changes in the formulary.

#### 4. Meetings

The Committee will meet as often as is required to deliver the work requested by the ERWG. This may include a mixture of face to face, virtual and telephone meetings.

- 4.1 **Agenda and Papers.** The agenda and papers will be circulated at least 7 working days in advance of the meeting.
- 4.2 **Quorum.** Representation from all three health boards including an acute medical representative, a GP and a pharmacist. There also needs to be a minimum of 50% attendance from the membership.
- 4.3 **Minutes.** Meeting and action notes will be kept of the proceedings.
- 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 CEWG. These will be strictly confidential and held securely by the secretariat. Members are also required to declare any competing interests to the CEWG when commenting on relevant items of business at the beginning of each meeting.

#### 5. Operating and Reporting Arrangements

CEWGs are sub-groups of the ERWG. The CEWG will be guided and advised by recommendations from the ERWG.

#### Terms of reference to be reviewed annually

**Date approved:** 29th September 2021 at ERFC meeting

**Review date:** 30th September 2022