

## BSW Area Prescribing Committee

### Terms of Reference

#### 1. Introduction

1.1 In accordance with their Constitutions and Standing Orders, the participating organisations establish the BSW Area Prescribing Committee (APC).

1.2 Each organisation represented in the APC works as part of the BSW STP. Decisions taken by this Committee do not affect the liability of each individual organisation for the exercise of its functions.

1.3 These Terms of Reference set out the Committee's purpose, responsibility, scope, membership, reporting arrangements, frequency of meeting, and quorum.

#### 2. Purpose of the Committee

2.1 The APC facilitates clinical leadership on prescribing new medicines, enabling clinical input from all specialties and disciplines as appropriate in a way that treats all potential new medicine developments consistently.

2.2 The Committee helps improve the health outcomes for the BSW population by promoting safe, high quality, consistent, evidence-based and cost effective use of medicines and devices (only those prescribed on FP10) across the BSW health economy and BSW partner organisations, and by supporting the implementation of evidence-based advice on the best use of medicines and devices.

#### 3. Responsibilities / Duties of the Committee

3.1 The Committee will, on behalf of the BSW health economy, manage the BSW Joint Formulary. Within this remit, the Committee will:

- Consider applications for medicines to be added to the Joint Formulary, recommend their adoption or non-adoption, and specify the circumstances under which adopted medicines should be used;
- Regularly review the Joint Formulary and audit its impact to ensure that it is consistent with the aims of safe, effective, and cost-effective prescribing, and with national guidance;
- Make evidence-based commissioning recommendations to the BSW CCG in relation to medicines, including for disinvestment, taking account of and monitoring implementation of the National Institute for Health and Care Excellence (NICE) technology appraisal (TA) guidance to ensure that new medicines are commissioned in a safe and supported way;
- Review and consider the adoption of RMOC guidance and recommendations;
- Recommend disinvestment, e.g. where there is little or no evidence base, or relative cost-effectiveness appears to be poor compared to other available options for commissioning;
- Provide evidence-based recommendations on the prescribing of new medicines that

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**BSW APC:** BaNES, Swindon & Wiltshire (BSW) CCG, Avon & Wiltshire Mental Health Partnership NHS Trust (AWP), Royal United Hospitals Bath NHS Foundation Trust, Great Western Hospitals NHS Foundation Trust, Salisbury NHS Foundation Trust, Virgin Care, Swindon Community Health Services, Wiltshire Health & Care.

fall outside of NICE/RMOC guidance;

- Review areas of inconsistent formulary status across the health economy and make recommendations on their resolution.
- Consider recommendations from the High Cost Drugs sub-group relating to high cost drug “Free of Charge” (FOC) offers to the NHS, and escalate recommendations to the BSW CCG for approval, as appropriate;
- Regularly consider the cost-effectiveness of existing treatments and make recommendations for prescribing change where appropriate;
- Undertake horizon scanning to forecast developments in medicines related healthcare and support the introduction of new medicines;
- Ensure the formulary is updated in response to national guidance, medicines licence changes, and safety alerts related to medicines e.g. by NICE or the Medicines Health Regulatory Authority;
- Approve and regularly review BSW medicine formulary shared care agreements, prescribing guidance, and medicines related guidelines, and monitor adherence to these guidelines.

#### 4. Membership

4.1 The following are members of the Committee / Group, i.e. they have the right to receive meeting documents and to participate in the Committee’s decision-making (within the remit as determined in these ToR):

- Three GPs from BSW CCG member practices, each representing one of the three localities (BaNES, Swindon, Wiltshire);
- The BSW Lead Clinical Effectiveness Pharmacist (Formulary) and the BSW formulary pharmacist;
- The Chair of the Royal United Hospital (RUH) DTC;
- The Chair of the Great Western Hospital (GWH) DTC;
- The Chair of the Salisbury Hospital (SFT) DTC;
- The Chief Pharmacist of the Royal United Hospital;
- The Chief Pharmacist of the Great Western Hospital;
- The Chief Pharmacist of the Salisbury Hospital;
- One Trust Pharmacy representative (formulary) each from GWH/RUH/SFT.
- Three CCG Medicines Optimisation representatives, each representing one of the three localities (BaNES, Swindon, Wiltshire);
- One lead pharmacist representative each from Avon and Wiltshire Mental Health Partnership NHS Trust, Wiltshire Health & Care, Virgin Care, and Swindon Community Health Services;
- One BSW Public Health representative

4.2 Either one of the GPs, or the Secondary Care Consultants, will chair the Committee, with the respective other serving as Deputy Chair.

4.3 The Chair, on behalf of the Committee, may invite such individuals to the Committee’s meetings as are considered necessary to enable the Committee to conduct its business effectively. For the avoidance of doubt, such invited attendees cannot participate in the Committee’s decision-making.

4.4 Members of the Group must be authorised by their organisation to agree, on behalf of the organisation they represent, actions / steps / activities within the remit of this Group. Their

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recommendation would be based on consensus of opinion gathered by that individual on behalf of the organisation.

4.5 The Group itself has no decision-making powers other than those described in these Terms of Reference. On behalf of the organisations they represent, representatives reach agreements consistent with the powers delegated to them through their respective organisation’s scheme of delegations and delegated financial limits.

## 5. Quoracy

5.1 The meeting is quorate if 10 members are present, including a clinician, a pharmacist, and one representative each from an acute trust, a community provider, and the CCG.

5.2 If the meeting becomes inquorate, it shall either be suspended, or decisions (within the Committee’s remit as described by these ToR) agreed at the next quorate meeting of the Committee.

## 6. Frequency of meetings

6.1 The Committee will meet monthly, or otherwise as required.

## 7. Secretary

7.1 The Secretariat for the Committee is provided by the BSW CCG Medicines Optimisation Team. The Secretariat shall:

- support the Chair in preparing and managing the Committee’s meetings, including agenda setting;
- ensure timely provision of meeting papers / materials to Group members, normally distributing papers / materials 5 working days before the meeting;
- record in and agreed format the business transacted and decisions taken by the Committee within the remit described in these ToR;
- support the preparation of onward reports by the Committee;
- prepare regular summaries of Committee decisions (within the remit described in these ToR) for inclusion in newsletters for providers, GP practices and community pharmacists;
- regularly publish on the BSW APC Joint Formulary website formulary changes, recommendations, guidelines or documents agreed at Committee meetings.

## 8. Reporting

8.1 After each of its meetings, the Committee will report in adequate and agreed formats

- through the BSW CCG Lead Pharmacist / Director of Medicine Optimisation to the BSW CCG Quality Performance Assurance Committee (QPAC) about issues that impact the quality of commissioned services and / or the patient experience, and will bring to the BSW CCG QPAC any commissioning recommendations in relation to medicines;
- through its members to relevant drugs and therapeutics committees, and to relevant individuals including health and care professionals in all organisations represented in the Committee;

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8.2 Through these reporting arrangements, members will also facilitate decision-making, as may be required, through the partner organisations' own internal governance structures.

8.3 In addition, the Committee may agree to report to all organisations represented in the Committee on any matters within the remit of this Committee which in the Chair's view require the attention and/ or decision making of the represented organisations.

8.4 The Committee will receive the minutes from the monthly High Cost Drugs Group, the BSW Antimicrobial Stewardship Group, and the APC Technical Group.

## 9. Conduct of meetings

9.1 Members of the Committee will

- conduct the Committee's business in accordance with any national guidance and relevant codes of conduct / good governance practice, including the Nolan principles of public life;
- comply with the standards of business conduct, including the protocols for managing conflicts of interest, as determined in their organisations' relevant policies and guidance on good and proper meeting conduct;
- act as conduits between the Committee and partner organisations, and facilitate two-way communications, in order to obtain views that may inform the Committee's business.

9.2 A meeting is constituted when members attend face-to-face, via telephone or video conferencing, any other electronic means, or through a combination of the above. Quoracy rules apply in any case. For the avoidance of doubt, this provision applies to and facilitates the Committee's decision making by email, should this be required to expedite an urgent decision.

9.3 Provided the meeting is quorate, the Group will take decisions (within the remit of this Committee as described in these ToR) through consensus of those present.

9.4 If a representative is not able to attend a meeting, a nominated and suitably authorised deputy may attend on their behalf.

## 10. Review

10.1 The Committee will regularly review its performance, its membership and these Terms of Reference, and agree any amendments it considers necessary to ensure it continues to discharge its business effectively. The Committee will advise partner organisations and the BSW CCG's QPAC of the outcomes of its regular review of its performance, and of the amendments it intends to make to its Terms of Reference, and will consider feedback from partner organisations and the BSW CCG's QPAC.

**Effective date:** 11th December 2020

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**Contact:** Rachel Hobson

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