



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board

**Corporate Medicines Management Group**  
**September 2022**

## **TERMS OF REFERENCE**

### **1. Purpose**

The group will provide a Health Board-wide strategic approach to medicines management issues with due regard to clinical and cost-effectiveness, in order to ensure our patients have safe, consistent and optimal access to medicines. Separate Clinical Board Medicines Management Groups contribute to the delivery of these strategic aims.

### **2. Membership**

The group will consist of the following members:

- a. Executive Medical Director, Vice-Chair,
- b. Clinical Director of Pharmacy and Medicines Management; Chair,
- c. Each Clinical Board will nominate a medical representative and there will be a minimum of two doctors from primary care (one Health Board employed and one from the Local Medical Committee (2 representative on membership)).
- d. Clinical Board Pharmacist (from each clinical board).
- e. Senior Pharmacist – Medicines Access
- f. The Director of Nursing will nominate TWO nurses (one each with a background in primary and secondary care)
- g. The Director of Finance and/or a nominee
- h. The Public Health Service will nominate ONE representative
- i. The Chair of each subgroup (unless already nominated in a category above).

In the event that a member is unable to attend a meeting of the group, a named deputy may attend in his/her place.

Membership of the group shall end if a member resigns or is absent from 3 consecutive meetings, unless the group is satisfied that the absence is due to a reasonable cause.

### **3. Role and responsibilities**

Responsibilities lie in 4 main areas:

- Statutory functions for entry of new medicines
- Medicines safety
- Prescribing performance
- Strategic planning for medicines management

## Key Objectives.

3.1 To review, manage and co-ordinate the entry of new drugs and extended use of existing drugs, including horizon scanning.

3.2 To support systems for the implementation and monitoring of national and local guidance on medicines e.g. AWMG, NICE, in line with the requirements of the Welsh New Treatment Fund i.e. ensure treatments are available within 60 days of NICE Final Appraisal recommendation or Welsh Government endorsement of AWMSG drug technology recommendations – including highlighting to Welsh Government when this will not be possible.

3.3 Ensure the best possible clinical outcomes for patients by promoting safe, effective and evidence-based medicines management within the finances available.

3.4 Develop a strategies for prescribing and medicines management which engages clinicians throughout the UHB within the financial constraints and integrated business plans. Key elements of the strategy are likely to include:

- access to medicines (including managed introduction)
- safe systems (including statutory & governance obligations)
- drug expenditure – including the use of incentives in primary and secondary care
- performance management
- integration with independent contractors
- IT support
- workforce issues.

3.5 Establish strong links with individual Clinical Board Medicines Management Groups to maintain clear and consistent prescribing messages and facilitate cross-UHB working.

3.6 Monitor and review the strategy, responding promptly to national changes in NHS policy that will affect prescribing and medicines management, and advise the UHB accordingly.

3.7 In collaboration with appropriate Clinical Boards, reach consensus on the place in treatment of relevant new drugs/ formulations (or of existing drugs with new indications) and on the cost/affordability of making these drugs routinely available within the UHB.

3.8 Consider and agree a robust implementation process for recommendations on new drugs or new indications for existing drugs from NICE, All-Wales Medicines Strategy Group and Clinical Board Medicine Management Groups.

3.9 Horizon scan and forecast developments in healthcare which involve the use of medicines and advise on their potential impact on the UHB within the resources available.

3.10 Review and update existing medicines-related policies and procedures to ensure they remain fit for the UHB.

3.11 Act as a focus for developing and refining local professional opinion on drugs, therapeutics and related prescribing issues (including risk management) and to convey such opinions through robust communication strategies.

3.12 Produce an annual report for the Health System Management Board.

#### **4. Conduct of business**

4.1 The group will meet monthly. Additional meetings may be held on an exceptional basis at the request of the Chair.

4.2 Questions at any meeting should be resolved, if possible, by consensus. If a matter needs to be put to the vote, the person chairing the meeting will have a second casting vote.

4.3 The quorum for the group will be attendance by at least 50% of the membership.

4.4 Members must declare financial or personal interests in any related matter that is the subject of consideration. All declarations made as a result of this provision, and any action taken, should be noted in the minutes of the meeting.

4.5 Administrative support for the Group will be provided from the Directorate of Pharmacy and Medicines management.

#### **5. Status**

5.1 The group will be accountable to the UHB Health Systems Management Board (HSMB)

5.2 Terms of reference previously approved by HSMB on 19<sup>th</sup> September 2013

5.3 Terms of reference will be reviewed annually by the HSMB.

#### **6. Subgroups (Appendix 1)**

6.1 The group may set up sub-groups or working groups, of which the majority of members need not be members of the group.

6.2 Terms of reference for subgroups will be agreed by the main group

6.3 Sub-groups or working groups should normally only operate in an advisory role to the group

6.4 The work and meetings of the sub-groups should be reported to the group via meeting notes and/or quarterly reports.

**August 2022**

## **Appendix 1: UHB Medicines Management Group- Current subgroups**

Current subgroups and their purpose are outlined below:

**a. Shared care subgroup (quarterly meetings)**

- make recommendations on Shared Care Prescribing Arrangements and suitable content of Shared Care protocols

**b. Good prescribing guide working group (no meetings)**

This is a “virtual” group which co-ordinates the publication and dissemination of the UHB Good Prescribing Guide. An electronic version is available on the UHB intranet site and work has begun to integrate the contents with the UHBs e-formulary (Inform).

**c. Safe medication practice group (virtual group with monthly Executive steering meeting)**

Strengthen safe medication practice within the Cardiff and Vale University Health Board, agree and disseminate advice on safe prescribing practice and lead implementation of good practice for safe medicines use.

**d. Antimicrobial management group (meet bimonthly)**

Develop, agree and disseminate strategies on good prescribing practice and antimicrobial use across the Health Board including

- which antimicrobials should be available/prescribed (based on evidence and local sensitivity and resistance patterns)
- safe and effective use of antimicrobials e.g. dose, duration, drug level monitoring
- financial implications of antimicrobial use and developments.

**e. Thromboprophylaxis and anticoagulation group (virtual group with Executive steering group)**

**f. Controlled Drugs Local Intelligence Network**

**g. Pharmacy Medicines Management Practice Group**