

WEST HAMPSHIRE CLINICAL COMMISSIONING GROUP

BASINGSTOKE, SOUTHAMPTON AND WINCHESTER DISTRICT PRESCRIBING COMMITTEE

TERMS OF REFERENCE

Name:	Basingstoke, Southampton and Winchester District Prescribing Committee
Constitution:	The Committee has been established by the Management Boards of the following organisations: West Hampshire CCG Southampton CCG North Hampshire CCG University Hospitals Southampton FT Hampshire Hospitals FT Southern Health FT Solent NHS Trust
Authority:	Professional Advisory
Accountability	The Committee will be accountable to the Chief Executives of the constituent organisations. The Committee will produce an annual report and, when necessary, report matters of concern or importance to the Chief Executives during the year.
Purpose:	<ol style="list-style-type: none"> 1 To promote high quality, safe, appropriate and cost-effective prescribing and medicines optimisation within the local health community 2 To ensure, where possible, consistency of approach on prescribing within the local health community 3 To provide advice and guidance to NHS organisations and clinicians within the local health community on prescribing and medicines related issues. (The local health community is defined by the Committee's constituent organisations)
Key functions:	<ol style="list-style-type: none"> 1 To provide guidance to constituent organisations on the costs and benefits of medicines, prescribing and medicines management issues. 2 To facilitate the development and application of clinical governance to prescribing and the management of medicines to ensure medicines are used safely and any risks are appropriately managed. 3 To provide guidance to constituent provider organisations and commissioners in planning for the introduction of new medicine developments, including assessment of the likely financial and service impact, by 'horizon-managing' significant developments. 4 To advise on the management of CCG commissioned medicines within the PbR tariff exclusions, including arrangements for adding medicines in year if necessary. 5 To horizon scan and assess the impact of new medicines on the local health economy, critically evaluating their evidence base and making recommendations for their introduction where supported. 6 To horizon-scan and advise constituent organisations on the timely and effective implementation of medicines related NICE guidance. To support constituent organisations to monitor the implementation of NICE guidance. 7 To advise on medicines related safety matters including the implementation of patient safety alerts issued by NHS England (previously NPSA). 8 To note and advise constituent organisations on the impact of medicines related guidance issued by the HIOW Priorities Committee and Wessex Strategic Clinical Networks. 9 To note medicines related decisions made by NHS England in relation to the commissioning of specialised services. 10 To note recommendations on medicines made by Portsmouth and South East

	<p>Hampshire Area Prescribing Committee and support collaborative working between the committees.</p> <p>11 To make recommendations to clinicians on appropriate prescribing responsibility, whether within primary or specialist care, and maintain the 'Red, Amber, Green' list.</p> <p>12 To develop and approve shared care guidelines, treatment/prescribing guidelines and advise on the medicines related elements of local care pathways.</p> <p>13 To undertake and approve medicine evaluations (including reviews of classes of medicines) and make recommendations to constituent organisations on their outcome.</p> <p>14 To issue guidance in support of local organisations' formulary decisions</p> <p>15 To develop and recommend health community wide prescribing savings initiatives.</p> <p>16 To co-ordinate health community wide medicines optimisation initiatives such as the development of patient group directions, the prescribing and use of diabetes medicines and the maintenance of a wound formulary.</p> <p>17 To monitor the effectiveness of medicines management activities, including the guidance given by the Committee, within the local health economy.</p>
Administrative Support:	West Hampshire CCG will be responsible for administering the Committee. Constituent organisations will take responsibility for administering the sub-groups of the Committee.
Sub-groups of the Committee	The following sub-groups exist: Medicines Evaluation Committee Diabetes Sub-group Wound Dressing Sub-group Patient Group Directions Sub-group Medicines Safety Sub-group Primary Care Antibiotic Guidelines Sub-group
Membership:	The membership will take account of professional and organisational representation as well as involving other local stakeholders. The suggested membership is outlined in Appendix 1. Each constituent organisation will nominate their own representatives and named deputies as per the suggested membership and notify this to the Committee Secretary. The Chair and Vice Chair of the Committee will be elected by the membership.
Quorum:	The meeting will be considered quorate if all of the following are in attendance: <ul style="list-style-type: none"> • At least two medically qualified persons, one of whom must be a GP. • At least one pharmacist • At least one representative from primary care • At least one representative from secondary care • A representative from at least three out of the seven constituent organisations
Invitees:	Clinical experts from the constituent organisations may be invited to attend as appropriate, but will be asked to leave the meeting before the Committee confirms its recommendations.
Voting rights:	All full members will have voting rights where a vote is required, although the Committee will aim to reach decisions by consensus opinion wherever possible.
Declaration of interests:	The Chairman will ask members to declare their interests and ensure that declarations are formally recorded. Interests that must be declared include: <ul style="list-style-type: none"> • Remuneration such as expenses or remuneration for work undertaken. The source of remuneration must be declared from any organisation or individuals with whom NHS organisations have a commercial relationship, relevant to the work of the committee. • Sponsorship such as attendance at meetings and conferences • Individual shareholdings in relevant companies. If a conflict of interest is established, the member shall withdraw from the meeting and play no part in the relevant discussions or decision.

	Clinical experts attending the meeting will be asked to declare any interests relating to the item for which they have been invited, this will normally be done in advance of the meeting.
Frequency of meetings	The committee will meet six times each calendar year at a frequency of every two months
Review:	The terms of reference will be reviewed by the Committee every 2 years.
Date approved:	April 2013

Organisation represented & role		Name
West Hampshire CCG	Medicines Management Lead	Neil Hardy
	Interface Pharmacist	Catherine Mclean
	GP prescribing leads (localities)	Dr Madelyn Dakeyne, Dr Emma Harris, Dr Mike Zardis
Southampton City CCG	Medicines Management Lead	Julia Bowey
	GP prescribing lead	Dr Tony Kelpie
North Hampshire CCG	Medicines management Lead	Alma Kilgarriff
	GP Prescribing leads	Dr Chris Hunter, Dr Philip Hiorns,
University Hospitals FT	Chief Pharmacist	Sue Ladds
	Chair of Drugs Committee	Dr Derek Waller
Hampshire Hospitals FT	Chief Pharmacist	Ruth Whale (acting)
	Chair of Drugs Committee	Dr Salah Matti
Southern health FT	Chief Pharmacist	David Jones
	Medical Representative	Dr Raja Badrakalimuthu
Solent NHS Trust	Chief Pharmacist	Caroline Bowyer
	Medical representative	Dr Tony Snell
Medicines Evaluation Sub-Committee	Committee Chair	Dr Anastasios Lekkas
	Regional Medicines Information Medicines Evaluation Pharmacists	Sue Gough
Commissioning	Specialist Pharmacist for Commissioning	Julia Wright / Sarah Kerr
Public Health and/or Clinical Effectiveness representative (up to two representatives nominated by Chief Executives)	Associate Medical Director Clinical Effectiveness (UHS)	Martin Stephens
	Public Health Representative	Vacant
Finance representative	Deputy Chief Financial Officer - WHCCG	John Vaughan
Nursing representative	Nurse member of UHS Drugs Committee	Jacque Trim
Local Medical Committee	Nominated representative	Dr Laura Edwards
Local Pharmaceutical Committee	Nominated representative - Chief Officer H & IOW LPC	Sarah Billington
Lay Member	Patient representation	Angelina Whitmarsh