

East Kent Prescribing Group Terms of Reference

1. Statement of Purpose

- 1.1. To make recommendations to the East Kent Clinical Commissioning Groups (CCGs) on issues relating to the prescribing, quality, safety and cost effectiveness of medicines and other prescribed items, that are relevant to all 4 East Kent CCGs.

2. Methodology

- 2.1. The EKPG will receive drug related policy recommendations from the Kent and Medway PRGC (Policy Recommendation and Guidelines Committee) and give consideration to the implementation of these policy recommendations by East Kent CCGs. This will include the financial impact of these decisions.
- 2.2. The group will review new NICE technology appraisals and clinical guidelines, assess the impact for the local health economy and amend the formulary status of drugs and other prescribed items reviewed by NICE to reflect the guidance.
- 2.3. The group will review new Medicines and Healthcare products Regulatory Authority (MHRA) safety alerts and regulatory amendments and make recommendations for local implementation.
- 2.4. The group will consider requests from all providers with respect to the acceptance of new drugs and other prescribed items onto the local acute trust formularies, and consider the consequent impact on GP prescribing in East Kent.
- 2.5. The group will consider shared care guidance associated with such decisions and where appropriate recommend detail for implementation across East Kent.
- 2.6. The group will receive reports of new drugs and other prescribed items prior to launch and consider the cost implications for East Kent CCGs (horizon scanning). Horizon scanning will also include cost pressures and funding required for the following year's annual planning round.

New drugs and other prescribed items which require a policy recommendation from PRGC will be identified and prioritised according to the criteria outlined below in 2.8.

- 2.7. Information on new drugs and other prescribed items for primary care prescribing will be considered by the group and a formulary status assigned to advise primary care prescribers on the recommendation across East Kent.
- 2.8. New drugs and other prescribed items may be selected for assessment by EKPG if there is no NICE appraisal planned.

New drugs and other prescribed items will be prioritised for review according to the following criteria:

- Clinical effectiveness and patient safety
- Place in therapy and benefit relative to other available treatments
- Cost effectiveness or resource impact
- Local health priorities

- 2.9. The group will consider the clinical and cost effectiveness of new indications for existing drugs and make recommendations to the East Kent CCGs.
- 2.10. The group will consider suggestions for changes to medications in clinical treatment pathways as part of the Quality, Innovation, Productivity and Prevention (QIPP) programme and agree recommendations to East Kent CCGs for implementation.
- 2.11. The group will consider prescribing issues concerned with both medicine and prescription non-medicine items requested by the Kent Community Health Trusts and other providers and provide recommendations to East Kent CCGs.
- 2.12. The group will approve recommendations and tools to support practices in making cost effective changes to prescribing.

Approved by: East Kent Prescribing Group (Representing Ashford CCG, Canterbury and Coastal CCG, South Kent Coast CCG and Thanet CCG)

Date: September 2018

Address: c/o Canterbury and Coastal CCG, Ground Floor, Council Offices, Military Road, Canterbury, Kent, CT1 1YW

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- 2.13. The group will act upon all reports from East Kent Medicines Management where a risk has been identified to provide assurance that medicines are handled safely and securely and healthcare providers adhere to the Medicines Act for the storage, prescribing, dispensing, recording and disposal of drugs, including controlled drugs.
- 2.14. The group will review recommendations from the Regional Medicines Optimisation Committee and implement as appropriate.

3. Chairperson

- 3.1. The chair will be a CCG Prescribing Lead, nominated by the membership. In the absence of the Prescribing Lead a CCG Prescribing Advisor may be nominated to chair a meeting.

4. Membership of the Group

- 4.1. GP Prescribing lead from each of the 4 East Kent Clinical Commissioning Groups
- 4.2. Prescribing advisor from each of the 4 East Kent Clinical Commissioning Groups
- 4.3. Nurse Prescriber representative
- 4.4. Representative from East Kent Hospitals University NHS Foundation Trust Drug and Therapeutics Committee
- 4.5. Representative from Kent and Medway NHS and Social Care Partnership Trust Drug and Therapeutics Committee
- 4.6. Representative from Kent Community Health Foundation Trust Drug and Therapeutics Committee
- 4.7. Representative from Urgent care

Finance representation may be co-opted from CCGs as necessary.

5. Governance and Accountability

- 5.1. 'Conflict(s) of interest' will be a standing agenda item and will be declared at the start of each meeting. Any member with a conflict of interest will take no part in discussion or decision about an agenda item affected by their conflict of interest'.
- 5.2. Decisions must be agreed by all 4 CCG Prescribing leads or nominated clinical representatives.
- 5.3. It is expected that individual CCGs will engage patients in medicines issues through their own individual processes.
- 5.4. The recommendations and minutes of the EKPG will be a standing agenda item on the East Kent Clinical Assurance and Strategy Committee. This committee will ratify the EKPG recommendations.

6. Key Relationships

The group will need to ensure appropriate working relationships and communication with:

- 6.1. Kent and Medway Policy Recommendation Guidance Committee
- 6.2. CCG finance leads
- 6.3. East Kent Hospitals University NHS Foundation Trust Drugs & Therapeutics Committee (EKHUFT D&T)
- 6.4. Kent and Medway NHS and Social Care Partnership Trust (KMPT)

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- 6.5. Kent Community Health Foundation Trust (KCHFT)
- 6.6. Antimicrobial Stewardship Group
- 6.7. Optum Medicines Management Team
- 6.8. Medicines Management leads in all provider organisations.

7. Quorum

- 7.1. For the group to be quorate there should be a minimum of four members present that must include the CCG Prescribing lead (or nominated clinical CCG representative) or Prescribing Adviser from each CCG. If the CCG Prescribing lead is unable to attend then they should make their views known through their Prescribing Adviser.
- 7.2. If the group is not quorate then agreement from group members not present must be sought on any decisions made.

8. Schedule of Meetings

- 8.1. The group will meet monthly at a date and time agreed by the group
- 8.2. The agenda will be set by the medicines management team and the nominated chair.
- 8.3. It is intended that the agenda and meeting papers will be distributed two weeks prior to the meeting and unconfirmed minutes shall be made available within two weeks of the meeting.

9. Review of Terms of Reference

These terms of reference will be reviewed as required and at least annually by the group.

Approved: September 2018
Review due: September 2019